

N 12-0000000799

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

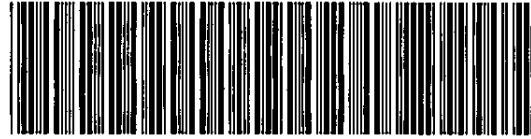
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

~~FEB 11 2014~~

~~C. GARROTHERS~~

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: All Paths to God, Inc

DOCUMENT NUMBER: N12000000799

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donna L. Loverro

Name of Contact Person

All Paths to God, Inc

Firm/ Company

P.O. Box 5735

Address

Sun City Center, FL 33571

City/ State and Zip Code

dloverro@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Inez Geri Shayman at (813) 938 3732
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|--|---|--|---|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2014

DONNA L. LOVERRO
ALL PATHS TO GOD, INC.
P.O. BOX 5735
SUN CITY CENTER, FL 33571

SUBJECT: ALL PATHS TO GOD, INC.
Ref. Number: N12000000799

We have received your document for ALL PATHS TO GOD, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

This filing has been deleted from our office at this time because we have not received the required signature for the registered agent. I sent an email on 02/12/14 requesting that you fax the signature to me and I have not received it yet so I had to remove the amendment filing. Please sign the document and return it to me and I will file the amendment again.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 714A00003983

Articles of Amendment
to
Articles of Incorporation
of

All Paths to God, Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

N12000000799

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

n/a

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

n/a

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 5735

Sun City Center, FL 33571

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Inez Shayman

650 Fort Duquesna

(Florida street address)

New Registered Office Address: Sun City Center, Florida

(City)

33573

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position:

Inez Shayman

Signature of New Registered Agent, if changing

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

| Type of Action (Check One) | Title | Name | Address |
|--|----------|---------------------------|---|
| 1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u>D</u> | <u>Nancy Sue Meixne</u> | <u>807 Ojai</u> <u>Sun City Center</u> <u>Florida 33573</u> |
| 2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | <u>T</u> | <u>Vicky Sand</u> | <u>804 La Jolla</u> <u>Sun City Center</u> <u>Florida 33573</u> |
| 3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | <u>S</u> | <u>Terry Parker Finch</u> | <u>2492 Kensington Greens</u> <u>Sun City Center</u> <u>Florida 33573</u> |
| 4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>P</u> | <u>Donna L. Loverro</u> | <u>1806 Fort Duquesne</u> <u>Sun City Center</u> <u>Florida 33573</u> |
| 5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>T</u> | <u>Inez Geri Shayman</u> | <u>650 Fort Duquesne</u> <u>Sun City Center</u> <u>Florida 33573</u> |
| 6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>S</u> | <u>Linda Bleser</u> | <u>2102 Westview</u> <u>Sun City Center</u> <u>Florida 33573</u> |

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The date of each amendment(s) adoption: September 6, 2013, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____"
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 1/31/14

Signature

Donna L. Loverro

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court-appointed fiduciary by that fiduciary)

Donna L. Loverro

(Typed or printed name of person signing)

President

(Title of person signing)

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