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(Re	equestor's Name)	
(Ad	idress)	
(Ac	ddress)	
(Cir	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Division of Corporations
NAME OF CORPORATION: Church of God of Prophecy of Sanford,
DOCUMENT NUMBER: N1200003758
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Loretta Milwood (Name of Contact Person)
Church of God of Prophecy of Sanford Florida, INC
P.O. Box 950226-226
(Address)
Lake Mary H. 32746 (City/ State and Zip Code)
(City/ State and Zip Code)
Myhope2699@AoL, Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Love to Milwood (407) 321-0541 (Name of Contact Person) at (407) 321-0541 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee U\$43.75 Filing Fee & U\$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) \$252.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

TO: Amendment Section

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

Articles of Amendment to Articles of Incorporation

Church of God of Prop) hely of Sanford ently filed with the Florida Dept. of S	IL INC.
N 12 00 0 0 0 37		iaite)
	ber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	ates, this <i>Florida Not For Profit Corpo</i>	ration adopts the following
A. If amending name, enter the new name of the corpora		
Lake Mary Faith Mininame must be distinguishable and contain the word "corpor	sation" or "incorporated" or the abbre	viation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	A/1A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	s) / / / / / / / / / / / / / / / / / / /	·
C. Enter new mailing address, if applicable:	P.O. Box 95029	7 4
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	1	227111
	LK. Mary, FL	106/46
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		e of the
Name of New Registered Agent:	VIII	
Name of New Registered Agent.	14/1	
	(Florida street addre	ss)
<u>New Registered Office Address:</u>	A/M	
	(City)	Florida (Zip Code)
New Registered Agent's Signature, if changing Registere	d Agent:	
I hereby accept the appointment as registered agent. I am j		orthoposition.
	NA	AKE HAR
	Signature of New Registered Agent, if a	
	Page 1 of 4	SIX S
	-	N

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: X_Change X_Remove X_Add	PT John Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) NAChange	NA	NA	
A Add	ì	,	
A PRemove	Na		
2) MfChange	-11		
NA Remove	4/14		
3) NA Change	7/1/		
N Remove			
4) MChange	NA		
MAAdd NA Remove	,		
5) NPChange	NIA		
5) MinChange	11/13		
A B Remove	/\ A		
6) Machange	NIA		
MAdd MARemove	•		
1-11-tremove		Page 2 of 4	

(attach additional sheets, if necessary). (Be specific)
1d: Church of God of Prophecy Of Sanford FLTNC. # N12000003758.
New 70 be Changed to:
Lake Mary Faith Ministry Church of God of Prophec

E. If amending or adding additional Articles, enter change(s) here:

The	e date of each amendment(s) adoption: Sunday March 18,2018, if other than the this document was signed.
	(no more than 90 days after amendment file date)
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ument's effective date on the Department of State's records.
Ada	option of Amendment(s) (CHECK ONE)
M	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated Sunday March 18, 2018
	Signature Laretta Milwood
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Loretta Milwood (Typed or printed name of person signing)
	Registered Agent/President er Pastor (Title of person signing)