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(Re	questor's Name)	
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PICK-UP	TIAW [MAIL
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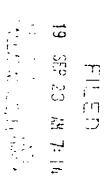
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Hand of God Fellows NAME OF CORPORATION:	hip Ministry, Inc	_	
N12000003850			
DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are subm	sisted for filing		
The enclosed Articles of Amenament and ice are subit	inted for fiftig.		
Please return all correspondence concerning this matter	to the following:		
Christopher J Ventrice			
	(Name of Contact Person)	
	(Firm/ Company)		
1777 Blount Road # 510			
	(Address)		
Pompano Beach FL 33069			
	City/ State and Zip Code)	
Chris@Handofgodfellowship.org			
E-mail address: (to be used	for future annual report n	otification	1)
For further information concerning this matter, please of	all:		
Christopher J Ventrice	954 at		973-9693
(Name of Contact Person)		a Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida Depar	tment of S	State:
■ \$35 Filing Fee ■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certiti Certiti	O Filing Fee cate of Status ed Copy tional Copy is used)
Mailing Address	Street A		
Amendment Section Division of Corporations		nent Secti i of Corpo	
in the second se			

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Hand of God Fellowship Ministry, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N12000003850 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: (Florida street address) New Registered Office Address: , Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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: XChange X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	0	Pedro Luis Garcia Capote	1777 Blount Road # 510
XAdd			Pompano Beach FL 33069
Remove			
2) Change			
Add			
Remove			
3) Change		<u> </u>	
Add			
Remove			
() Change			
4) Change			112 - 1.07
Add Remove			
5) Change			
Add			
Remove			Annual Part (Part Part Part Part Part Part Part Part
6) Change			
Add			
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f amending or addin attach additional shee	is, if necessary).	(Be specific	:)			
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ſ'nŧ	e date of each amendment(s) adop	otion:	, if other than the
late	this document was signed.		
Effe	ective date <u>if applicable</u> :	9-1-19	
		(no more than 90 days after amendment file date)	
	te: If the date inserted in this block ument's effective date on the Depar	does not meet the applicable statutory filing requirements, this date will not rtment of State's records.	be listed as the
4da	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/were adopt was/were sufficient for approval.	oted by the members and the number of votes east for the amendment(s)	
	There are no members or member adopted by the board of directors	s entitled to vote on the amendment(s). The amendment(s) was/were	
	Dated	20-19	
	Signature	2	
	have not been	an or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
	Christopher	J Ventrice	
		(Typed or printed name of person signing)	
	President		
		(Title of person signing)	