N12000000437

(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

APPROVED
AND
FILED

C. LEWIS
MAY 1 4 2014
EXAMINER

COVER LETTER

TO: Amendment Section
    Division of Corporations

NAME OF CORPORATION: Ministry To Ministries, Inc.

DOCUMENT NUMBER: N12000004437

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

Please return all correspondence concerning this matter to the following:

Sally J. Zito
_____
(Name of Contact Person)

Ministry To Ministries, Inc.
_____
(Firm/ Company)

8505 N. Highway 19
_____
(Address)

Salt Springs, FL 32134
_____
(City/ State and Zip Code)

ministry2ministries@centurylink.net
_____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sally Zito   at (352) 685-0151
_____   _____
(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:

☐ $35 Filing Fee   ☐$43.75 Filing Fee &   ☐$43.75 Filing Fee &   ☒$52.50 Filing Fee
             Certificate of Status   Certified Copy   Certificate of Status
                              (Additional copy is   Certified Copy
                              enclosed)   (Additional Copy is
                                                 Enclosed)

Mailing Address	**Street Address**
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Ministry To Ministries, Inc.

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

N12000004437

(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:

n/a
_____*The new*

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: n/a
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable: n/a
(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: n/a

_____
(Florida street address)

New Registered Office Address:

_____, Florida _____
(City)   *(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.

_____
Signature of New Registered Agent, if changing

Page 1 of 4

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	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ____ Change	_____	n/a	_____
____ Add			_____
____ Remove			_____
2) ____ Change	_____	n/a	_____
____ Add			_____
____ Remove			_____
3) ____ Change	_____	n/a	_____
____ Add			_____
____ Remove			_____
4) ____ Change	_____	n/a	_____
____ Add			_____
____ Remove			_____
5) ____ Change	_____	n/a	_____
____ Add			_____
____ Remove			_____
6) ____ Change	_____	n/a	_____
____ Add			_____
____ Remove			_____

Article III:

This corporation is organized exclusively for charitable and religious

purposes. No proceeds of the corporation will enrich any individual,

except that reasonable compensation may be paid in exchange for

services to the corporation.

The purpose of Ministry To Ministries, Inc. is to assist other

nonprofit ministries and churches when they incur a specific material

or monetary need.

This may include, but not be limited to:

Assisting with the funding of ministry programs.

Providing material goods to churches or ministries.

Providing a facility for youth outreach and special

ministry programs.

Assisting with the funding for, or the provision of, specific

material needs of veterans, the disabled, and the elderly.

The date of each amendment(s) adoption: _____ May 2nd, 2014 _____, if other than the
date this document was signed.

Effective date if applicable: _____ May 2nd, 2014 _____

(no more than 90 days after amendment file date)

Adoption of Amendment(s)   (**CHECK ONE**)

☐ 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   May 2nd, 2014 _____

Signature _____
            (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)

Sally J. Zito
_____
(Typed or printed name of person signing)

Vice President/Treasurer
_____
(Title of person signing)