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Amena 10,1,24,14

## **COVER LETTER**

Division of Corporations		•		
CHAPLAINS SPREADING NAME OF CORPORATION:	3 THE SEED MINISTRY	'INTERNATIONAL, INC		
DOCUMENT NUMBER: N12000006451				
The enclosed Articles of Amendment and fee are submitted for	or filing.			
Please return all correspondence concerning this matter to the	following:			
CARLOS MORALES				
(Name	of Contact Person)			
CHAPLAINS SPREADING THE SEED	MINISTRY INTER	RNATIONAL, INC		
(Fi	rm/ Company)	<del>.</del>		
214 E PINE ST				
	(Address)			
DAVENPORT, FL 33837				
(City/ S	State and Zip Code)			
CHAPLAINSSPREADINGTHESEED@GMAIL.COM				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
CARLOS MORALES	_at (321 ) 80	5-0278		
(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:				
(Add	fied Copy Cert litional copy is Cert	50 Filing Fee ificate of Status ified Copy ditional Copy is		

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

Enclosed)

	Articles of Amendment	DIVISION FILED
,	to Articles of Incorporation	14 1. TOP 14 OF
"haplains Spre	eading the seed	MINISTY
(Name of Corporation as currently file	t Number of Corporation (if known)	Internation
Pursuant to the provisions of section 617.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this Florida Not For Profit Co	orporation adopts the following
A. If amending name, enter the new name o	f the corporation:	
name must be distinguishable and contain the	word "corporation" or "incorporated" or the a	The new bbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the i		•
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI		
D. If amending the registered agent and/or new registered agent and/or the new regi	registered office address in Florida, enter the istered office address:	name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
New Registered Office Address.		
<del></del>	(City)	rida (Zip Code)
New Registered Agent's Signature, if changi I hereby accept the appointment as registered of	ng Registered Agent: agent. I am familiar with and accept the obliga	tions of the position.
Sig	nature 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 us a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change X_Remove X_Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Si	ones		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change		_		-	
Add				,	
Remove					
2) Change		_	<del></del>	-	
Add				,	···
Remove					
3) Change		_ <b>_</b>			
Add					
Remove					
4) Change					
Add					
Remove				•	
5) Change		_		_	
Add					
Remove					
6) Change					
_		_		-	
Add					
Remove					

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

Purpose of the corporation
A. To prepare men and women for ministry in jails, hospitals, nursing home
homeless, misstreated women's centers and evangelistic revivals.
B. To teach spiritual life
C. To prepare Chaplains to work as leaders in communities and to work with children
(Orphanages)

The date of each amendmen	.,	, if other than the
date this document was signed Effective date if applicable:	01/15/2014	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/w was/were sufficient for a	vere adopted by the members and the number of votes cast for the amendment(s) oproval.	
☐ There are no members or adopted by the board of	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated 01	/14/2014	
Signature 🔀	arlos mado	
have	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
Carlos	Morales	
	(Typed or printed name of person signing)	
Presid	lent	
	(Title of person signing)	