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COVER LETTER

Division of Corporations
NAME OF CORPORATION: VICTORY CHRISTIAN FELLOWSHIP, INC.
DOCUMENT NUMBER: N12000009253
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LEE WILLIAMS
(Name of Contact Person)
THE ONE SERVICES
(Firm/ Company)
7161 PEMBROKE RD. #600
(Address)
PEMBROKE PINES, FL 33023
(City/ State and Zip Code)
THEONESERVICES@YAHOO.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
LEE WILLIAMS (Name of Contact Person) (Area Code & Daytime Telephone Number)
(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:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) 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

Articles of Amendment Articles of Incorporation



VICTORY CHRISTIAN FELLOWSHIP, INC.

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

N12000009253

(Document Number of Corporation (if known)

Pursuant to the provisions of section 61 amendment(s) to its Articles of Incorpo		orida Not For Profit Corporation adopts	the following
A. If amending name, enter the new VICTORY CHRISTIAN F		NATIONAL, INC.	The new
name must be distinguishable and cont "Company" or "Co." may not be used		"incorporated" or the abbreviation "Cor	v." or "Inc."
B. <u>Enter new principal office addres</u> (Principal office address <u>MUST BE A</u>			
C. Enter new mailing address, if ap (Muiling address MAY BE A POS			
D. If amending the registered agent new registered agent and/or the n		ss in Florida, enter the name of the	
Name of New Registered Agen	<u>t</u> :		
New Registered Office Address:	(Florida s	treet address)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, it I hereby accept the appointment as reg		ith and accept the obligations of the positi	ion.
-	Signature of New Registered Ag	ent, 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 X_Remove X_Add	PT John V Mike SV Sally	Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			***************************************
Remove			
6) Change	•		
Add			
Remove			

amending or adding additional Arti tach additional sheets, if necessary).	(Re specific)			
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	e date of each amendment(s) adoption: (no more than 90 days after amendment file date)	
۸du	option 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 Signature	
	(By the charman 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)	
	L. WILLIAMS	
	(Typed or printed name of person signing) INCORPORATOR	
	(Title of person signing)	