## N13000000035

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FEB 1 9 2015

O. CARROTHER'S

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Gift of Life Ri	iverview, Inc	
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are su		
The enclosed three of the manera and lee me su	onniced for ming.	
Please return all correspondence concerning this ma	tter to the following:	
Michael R Jackson	(Name of Contact Perso	
	(Name of Contact Perso	n)
The Word of Life, Inc		
	(Firm/ Company)	
4004 0 1 5 1 0		
1601 Oak Pond St	(Address)	
	, ,	
Ruskin, FL 33570		
,	(City/ State and Zip Cod	e)
thewordoflifeinc@gmail.con E-mail address: (to be use	n ed for future annual report	notification)
For further information concerning this matter, pleas	se call:	
Michael R Jackson	at ( . 813.	) 523-6794.
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Dep	artment of State:
\$35 Filing Fee \$\sum \$\sum \text{\$\sum \text{\$\sin \text{\$\s	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☑\$52.50 Filing Fee Certificate of Status 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 to Articles of Incorporation of

		of		
Gift of Life Riverview, Inc		•		黄色黄
(Name of Corporation as currently filed		Dept. of State	2)	3:31.
N13000000035				
(Document !	Number of Corpor	ration (if known	n)	
ursuant to the provisions of section 617.1006, Finendment(s) to its Articles of Incorporation:	lorida Statutes, th	is <i>Florida Not</i>	For Profit Corpo	ration adopts the follow
If amending name, enter the new name of	the corporation:			. يون
The Word of Life, Inc				The n
ame must be distinguishable and contain the wo Company" or "Co." may not be used in the na Enter new principal office address, if appli	icable:	or "incorpord"	ited" or the abbre	viation "Corp." or "Inc
rincipal office address <u>MUST BE A STREET</u>	<u>"ADDRESS"</u> )			
	_	•		<del></del>
	<u></u>			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	E BOX)			
	<del></del>			<del></del>
	<del></del>			<del> </del>
. If amending the registered agent and/or re			da, enter the nam	e of the
new registered agent and/or the new regist	tered office addr	ess:		
Name of New Registered Agent:				
<del></del>				
New Registered Office Address:	(Flor	ida street address)		
			, Florida	
	(City)		, 1 10t1ua .	(Zip Code)
ew Registered Agent's Signature, if changing	n Donistared Acc	mt•		
nereby accept the appointment as registered ag	ent. I am familia	ur with and acc	ept the obligations	of the position.
		•		
Signo	ature of New Regi	istered Agent, i	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 <math>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	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add	-	_		
Remove				
4) Change		_		
Add				W-04-20-00-00-00-00-00-00-00-00-00-00-00-00-
Remove				
,				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Art attach additional sheets, if necessary).	(Be specific)				
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	The date of each amendment(s) adoption:			
Effective date if applicable:  (no more than 90 days after amendment file date)				
Ado	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.			
Ø	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 1/11/2015 Signature Will we was a superior of the superi			
	(By the chairman of 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)	_		
	Michael R Jackson (Typed or printed name of person signing)			
	President (Title of person signing)			