## N13000002251

questor's Name)	
dress)	
dress)	
//State/Zip/Phone	e #)
☐ WAIT	MAIL
siness Entity Nan	ne)
cument Number)	
Certificates	s of Status
Filing Officer:	
•	
	dress)  dress)  dress)  dress)  dress)  dress)  dress)  dress  dress)  dress  d

Office Use Only



200285104342

04/29/16--01037--035 \*\*35.00



MAY 0 3 2016 C MCNAIR

## COVER LETTER

						16 TO CO CORNALISM
•	,	COVER LETTER	i			
TO: Amendment Section Division of Corporation	ons					27 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
NAME OF CORPORAT	POWER INSTITU	TE OF LEADERSHIP II	NC.	<u>-</u>		
DOCUMENT NUMBER:	N13000002251		· · · · · · · · · · · · · · · · · · ·			
The enclosed Articles of Ai	mendment and fee are sub	bmitted for filing.				
Please return all correspond	dence concerning this mat	ter to the following:				
MARSHA SIHA						
		(Name of Contact Perso	on)	<u> </u>		<del></del>
INCFILE.COM						
		(Firm/ Company)				
16242 SALMON LANE						
		(Address)				<del>_</del>
SPRING TX 77379						
		(City/ State and Zip Coo	ie)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
MARSHA@INCFILE.CO	м					
	-mail address: (to be used	•	notification)	,		_
For further information con-	cerning this matter, please	call:				
MARSHA SIHA	·····	at	11-235-7533			_
	(Name of Contact Person	•		•	phone Number)	
Enclosed is a check for the f	following amount made pa	ayable to the Florida Dep	artment of St	ate:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certific Certifie	onal Copy is		
Mailing A	Address	Street	Address			

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Constitution of the second sec

## Articles of Amendment to Articles of Incorporation of

POWER INSTITUTE OF LEADERSHIP INC.		
(Name of Corporation as	currently filed with the Flo	rida Dept. of State)
N13000002251		
(Documer	nt Number of Corporation (if l	(nown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutos, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation;	
Institute of christian leadership, inc.		The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" or "incorporate	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	)X)	
D. If amending the registered agent and/or register new registered agent and/or the new registered		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(F.	lorida street address)
		Florida
_	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		the obligations of the position.
	Signature of New Regist	tered 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 sitle 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 numed 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 Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1)Change			
Add Remove			
2) Change			
Remove			
3) Change		····	
Remove			
4) Change Add			
Remove			
6/ Change Add			
Remove			
5) Change Add			
Remove			<u> </u>

f amending or adding udditional Arti utach additional sheets, if necessary).	(Be specific)				
			<del>_</del>		<u></u>
	··				
		<del></del>	· <u> </u>		
	<u> </u>				
		**************************************			
				<del>,</del>	
				·	<del></del>
	<u> </u>				
<u></u>					
				_	
······································					
···					
	<del>-</del>	<del></del>			

	to this document was signed.	ther than the
EI	Mective date if applicable:	
	(no more than 90 days after amendment file date)	
	ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed becament's effective date on the Department of State's records.	d as the
Ade	doption 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 APRIL 22, 2016	
	Signature	
	(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)	
	GEORGE VARGES	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	