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TO: Amendment Section Division of Corporations	4
NAME OF CORPORATION: The LOTAL	Temple Embassy Of Praise Inc.
DOCUMENT NUMBER: <u>11300003068</u>	<u> </u>
The enclosed Articles of Amendment and fee are subn	nitted for filing.
Please return all correspondence concerning this matte	r to the following:
	(Name of Contact Person)
The Lord's Temple E	Emhassy Of Praise Inc. (Firm/Company)
	5720 N.W. 27th P. (Address)
Mian	OI F 3305 4 (City/ State and Zip Code)
—E—mail ad	Idress: (to be used for future annual report notification)
For further information concerning this matter, please	call:
Name of Contact Person)	at (<u>454</u>) <u>882 - 5480</u> (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida Department of State:
\$35 Filing Fee \$1 Certificate of Status	S43.75 Filing Fee & Certified Copy Certificate of Status (Additional copy is enclosed) (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

of

Articles of Amendment to

Articles of Incorporation

of	O =
The Lord's Temple Embassyo	DouseTa
(Name of Corporation as currently filed with the Florida Dept. of State)	i 110013CIAC
113000003058	-
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the amendment(s) to its Articles of Incorporation:	following
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp."	
"Company" or "Co," may not be used in the name.	
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	•
	-
	_
C. Enter new mailing address, if applicable:	
(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:	
Name of New Neglistered Agent.	
(Florida street address)	
New Registered Office Address:	
, Florida, [City] (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.	
r nevery accept the appointment as registered agent. I am juntual with and accept the configutions of the position.	• .
Cinnetum of New Brains of A	28 1AL
Signature of New Registered Agent, if changing	ECR A
Page 1 of 4	質量で
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SECRETARY OF STATE ALLAHASSEE, FLORID,

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)

Example: X Change

X Add

X Remove

Please note the officer/director title by the first letter of the office title:

John Doe

Mike Jones

Sally Smith

<u>PT</u>

<u>SV</u>

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.

		— 		
Type of Act (Check One)		<u>Name</u>	<u>Addres</u> s	
l) Ch	ange <u>T</u>	Lori Davis (Treasurer)	16505 NW.	
Ad		(1° (U.341°)	Mani 13	PC 33054
2) Cha	ange VP	Johnny J. L	arry 18602 Nu	_
Ad	d move		Miami Gas	Jens, FZ 33055
3) Ch	ange <u>5</u>	Carol D. F. (Sec.)	oole 1438 NW.	
Ad		`	Man, T	
	ingeT	DEBORAH RE (Treasuser)	ED 15720 1	NW 27 PC
Ad	d nove		/1/140111 CSA	33054
5) Cha	nge <i>S</i>	Katrina Digre (Bec)	15720 Na Mian, E.	27PL ardens FZ
Add	d nove			-3254

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)

Example: X Change

X Add

X Remove

Please note the officer/director title by the first letter of the office title:

John Doe

Mike Jones

PT

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.

Sally Smith Type of Action Title Address Name (Check One) 5 NW. 27 ave 1) Remove 2) Add Carol D. Poole Change Miami, FL 33147 Add Change Remove 720 NW 27PC 5) Change Mian, Bardens FZ Remove

attach additional sheets, if necessary).	(ne specific)			
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ne date of each amendment(s) ac	option: Lef 2/1=	<u> </u>
Tective date <u>if applicable</u> :	(no more than 00 days after any drawt	Sla data)
	(no more than 90 days after amendment)	рие аале)
option of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac was/were sufficient for approva	opted by the members and the number of votes !.	cast for the amendment(s)
There are no members or meml adopted by the board of directors	pers entitled to vote on the amendment(s). The arrs.	amendment(s) was/were
Dated June	2 2013	
	-0 (Dan)//	
Signature(By the chairm	an or vice chairman the board, president of	r other officer-if directors have
not been selected, by	an incorporator – if in the hands of a receive ciary by that fiduciary)	er, trustee, or other
	orace Paule	
(7	yped or printed name of person signing)	President
		(Title of person sig