N130000004509

(Re	equestor's Name)	· ·
(Ac	ddress)	<u> </u>
(Ac	ddress)	
(Ci	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nam	ne)
(De	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
		į

Office Use Only



700272764467

05/11/15--01023--023 **35.00



Amend leane 10 5/15/15

COVER LETTER

TO: Amendment Section (+-

Division of Corporations
NAME OF CORPORATION: His Work Christian Ministries Inc.
DOCUMENT NUMBER: N 13 00000 4509
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Angela Perez (Name of Contact Person)
(Name of Contact Person)
His work Messianic Ministro, Inc. (Firm/Company)
4733 Trongud (Address)
Helena, MT 59(602 (City/State and Zip Code)
(City/ Saite and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Angela Perez at (406) 202-2207 (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:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$252.50 Filing Fee Certificate of Status (Additional copy is enclosed) \$252.50 Filing Fee Certificate of Status (Certified Copy (Additional Copy is Enclosed)
Mailing Address Street Address
Amendment Section Amendment Section
Division of Corporations Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

DIVISION OF CORPORATE
2015 MAY / / PM ID
PM 12: 42

Articl	es of Incorporation	OF COEST ST
1.1	of	2015 HAY GURPORA
(Name of Corporation as currently filed with the F		2015 MAY / PM 12:
N 1 3 00000 4 509 (Document Number of Company)	Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statuamendment(s) to its Articles of Incorporation:	ates, this Florida Not For Profit Corpor	ation adopts the following
A. If amending name, enter the new name of the corpora	ation:	
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ministries, Inc. ration" or "incorporated" or the abbrev	The new viation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	4733 Transcul	
(Principal office address MUST BE A STREET ADDRESS	E) Helena, MT S	59602
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4733 Transcut	
	Helona, MT 59	603
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		e of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	, Florida	
(City		(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am j		of the position.
Signature of New	w 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 as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	Title	Name	Address
1) Change		<u> </u>	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change	· · · · · · · · · · · · · · · · · · ·		
Add			
Remove			*
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<u></u>
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
, , ,	(20 speeges)				
The second districts the second secon					
		,			
					
·		.		·	
	 				
			 		
				····	<u> </u>
79.44 M.					
<u> </u>					
· · · · · · · · · · · · · · · · · · ·					

The date of each amendment(s) adoption: Lebourg 12, 2015 date this document was signed.	, if other than the	
Effective date if applicable:		
(no more than 90 days after amendment file date)		
Adaption 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 $5/3/15$		
Signature		
(By the chairman of vive chairman of the board, president or other officer-if directors bave not been solected, by an accorporator – if in the hands of a receiver, trustee, or		
other court appointed fiduciary by that fiduciary)		
Angela J. Perez		
(Typed or printed name of person signing)		
President		
(Title of person signing)		