N13000004509

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: His Work Messianic Winistrio DOCUMENT NUMBER: N 1 3 00000 4509 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Willard Percz
(Name of Contact Person) work Global ministries, Inc.
(Firm/Company) 8369 NW 662 ST. A4493 (City/ State and Zip Code) Ongela @ his workmini strics, ora E-mail address: (to be used for future annual report nonfication) For further information concerning this matter, please call: Mame of Contact Person) at 907 821-2091

(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 \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & Certificate of Status Certified Copy □\$52.50 Filing Fee Certificate of Status Certified Copy (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 to Articles of Incorporation of

His Work Messianic M (Name of Corporation as curren		
N1300000450°	 ጓ	
(Document Numb	er of Corporation (if know	vn)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For P</i>	rofit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	
HIS WOOK Global MMi's name must be distinguishable and contain the word "corpora	Stries, Inc.	The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" (or the abbreviation "Corp." or "Inc."
Company or Co. may not be used in the name.		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	<u> </u>
in the control of the	<u></u>	<u> </u>
		2
		9
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
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		5, 1
		·
D. If amending the registered agent and/or registered offi		ter the name of the
new registered agent and/or the new registered office	address:	
Name of New Registered Agent:		
Now Books and Office Address	(Flori	da street address)
New Registered Office Address:		
	(Cin.)	, Florida
	(City)	(Zip Coue)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fo		e obligations of the position.
	Signature of New Register	ed 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 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>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change	 		
Add			
Remove			
3) Change	<u> </u>		
Add			
Remove			
4) Change			
Add			
Remove			
E) Oliv			
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) date this document was signed.	adoption: 8/23/3015	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file	: date)
Note: If the date inserted in this document's effective date on the I	plock does not meet the applicable statutory filing records.	juirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes ca	st for the amendment(s)
There are no members or me adopted by the board of dire	mbers entitled to vote on the amendment(s). The ameters.	endment(s) was/were
Dated	124/15	
Signature	reala Willard Pen	
have not	airman or vice chairman of the board, president of ot been selected, by an incorporator – if in the hands of rt appointed fiduciary by that fiduciary)	
	Trige la J. Willard Perez (Typed or printed name of person s	igning)
	President (Title of remore riving)	
	(Title of person signing))