BEECHE

questor's Name)				
dress)				
dress)				
(City/State/Zip/Phone #)				
☐ WAIT	MAIL			
siness Entity Nan	ne)			
(Document Number)				
Certificates	s of Status			
Special Instructions to Filing Officer:				
	dress) dress) dress) WAIT siness Entity Nan cument Number) Certificates			

Office Use Only



300256384433

02/11/14--01008--008 **35.00

TAILLAHKSSES, FLORIDA SECREDEN OF STATE

7

FEB 13 2014

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Women of Wisdom Ministry N
DOCUMENT NUMBER: N 1300006368
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following: (Name of Contact Person)
Wonen g Wisdom Ministry Inc. 1. D. Bet 71/02
(Address)
Winter Haven, II. 33883 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Authorized at (863) 604-5560 (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 Certified Copy (Additional Copy is Enclosed)
Mailing 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

	Articles of Amendment	FILED
,	to Articles of Incorporation	
Woman a W	isdom Ministry	14 FEB 1 PM 1: 15
(Name of Corporation as currently f	iled with the Florida Dept. of State)	16 16 16 16 16 16 16 16 16 16 16 16 16 1
N/3000	ent Number of Corporation (if known)	
Pursuant to the provisions of section 617.100 amendment(s) to its Articles of Incorporation	6, Florida Statutes, this <i>Florida Not For Profi</i>	t Corporation adopts the following
A. If amending name, enter the new name name must be distinguishable and contain the "Company" or "Co," may not be used in the	e word "corporation" or "incorporated" or the	The new all beviation "Corp." or "Inc."
B. Enter new principal office address, if a (Principal office address MUST BE A STRI	pplicable: 130 W. C	estral Ave #5 1, 91.33880
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)		
D. If amending the registered agent and/o new registered agent and/or the new re	r registered office address in Florida, enter t egistered office address:	the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	.1	Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if chan	ging Registered Agent:	
	d agent. I am familiar with and accept the obl	igations of the position.
	Signature of New Registered Agent, if changing	 r

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		Doe Jones Smith	
Type of Action (Check One)	Title	Name /	<u>Addres</u> s
1) Change	1	Runnette Howard	1 Winter Ridge Ct.
Add		·	Winter Faren, 4.
Remove		/	33881
2) Change	PC	May Richardson	412 MIK St.
Add		, , ,	MUNALLY 91. DOSOS
Remove 3) Change	PCII	Maria Berry	P.O. But 2,256
Add	Maria is	now the	Eagle Lake, H.
Remove	Chief Di	now the indraiser Oriector	<u> </u>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			***
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

Please Del attached tetter, for continuation

Dissolution Clause:

Upon the dissolution of this organization assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c) 3 of the IRS code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or state or local government for public purpose.

	e date of each amendment(s) adoption:e this document was signed.	, if other than the		
Eff	Effective date <u>if applicable</u> :			
	(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			
	Signature Analte Fashish			
	(By the chairman or 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)			
	Annette Parrish			
	(Typed or printed name of person signing) President			
	(Title of person signing)			