N13000007427

	(Requestor's Name)	
	(A)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	(Business Entity Name)	<u></u>
	(Document Number)	
Certified Copies	Certificates of Status	
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Special Instructions to	o Filing Officer:	





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COVER LETTER

10: Amendment Section Division of Corporations

Victory Chapel INC NAME OF CORPORATION:		
N13000007427		
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are subm	itted for filing.	
Please return all correspondence concerning this matter	to the following:	
Jerennah Sims		
- (Name of Contact Persor	1)
	(Firm/ Company)	
3224 Mound Drive		•
	(Address)	
Fallahassee FL 32309		
(City/ State and Zip Cod	· · · · · · · · · · · · · · · · · · ·
Sunspenita92@gmail.com		
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please of	rall:	
(Name of Contact Person)	at	rea Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pay	vable to the Florida Dep.	artment of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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Name of Corporation as currently filed with th	e Florida De	pt. of State)			
×13000007427					
(Docum	nent Number	of Corporation (if	known)		
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	orida Statutes.	this Florida Not F	or Profit Corporati	on adopts the fo	ollowing
A. If amending name, enter the new name of th	e corporatio	<u>n:</u>			
					The new
a.me must be distinguishable and contain the word "Company" or "Co." may not be used in the nam	d "corporatio <u>e</u> .	n" or "incorporate	ed" or the abbreviat	ion "Corp." or	"Inc."
B. Enter new principa <u>l office address, if applica</u>	ıble:				
Principal office address MUST BE A STREET A		-			282
	-	··········			~ ~
	_				-6
Enter new mailing address, if applicable:				٠. ٢٦	9
(Mailing address MAY BE A POST OFFICE	<u>BON</u>)				3
	_			<u> </u>	ట్ల
				€1.7 €1.7	UT.
				£ 41	
 If amending the registered agent and/or registered agent and/or the new registered. 	<u>istered office</u> red office ado	<u>address in Florid</u> Iress:	a, enter the name o	<u>ii tne</u>	
	JEREMIAI				
Name of New Registered Agent.	222134011	ND DRIVE			
	3224 8100	-	Florida street address)		
New Registered Office Address	:	,	,		
	TALLAHA	SSEE	, Fle	32309 orida	
		(City)		Zip Code)	
New Registered Agent's Signature, if changing	Registered A	gent:			
hereby accept the appointment as registered ager	ni. Lam fami	iliar with and accep	ot the obligations of	the position	
	- 1		² 7		
-	-(-/::	7	(n. r.i. n. r	
	Sigi	заште ој меж Кеді	stored Agent, if chai	iging	

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:

Amach additional sheets, if necessary)

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

President, V. Vice President: T= Treasurer: S= Secretary, D= Director: TR= Trustee; C= Chairman or Clerk: CEO= Chief $ext{-}ext{-}xex$, utive Officer, CFO- Chief Financial Officer. If an officer director holds more than one title, list the first letter of each office $ext{-}ext{-}xex$ President. Treasurer, Director would be $ext{-}PTO$

! hanges 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 ! 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, !!tke Jones, V as Remove, and Sally Smith, SV as an Add

Kample: \(\sum_C \) hange \(\sum_C \) Remove \(\sum_C \) \(\sum_C \)	PT John De V Mike Jo SV Sally St	<u>oneş</u>	
sype of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
Change Add	PD	STEVEN WIKTORSKI	
* Remove			
2) Change Add	DS	VLASTA WIKTORSKI	
Remove Change Add Remove	PD	JEREMIAH SIMS	3224 MOUND DRIVE TALLAHASSEE, FL 32309
Change	DS	JACINTA SIMS	3224 MOUND DRIVE TALLAHASSEE, FL
Remove : Change Add			32309
Remove			
Remove			
E. If amending or addin (stach additional shee	ng additional Art ets, if necessary)	icles, enter change(s) here: (Be specific)	

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<u> </u>				
i he date of each amendment(s) add are this document was signed.	option: 8-30-2022		·	, if other than the
:: metare unit in appirative.	(no more than 90 days o	ijier amendmeni jile dai	(e)	
Note: It the date inserted in this bloc ascument's effective date on the Dep	k does not meet the applicab artment of State's records.	le statutory filing requir	ements, this date will no	t be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were add was were sufficient for approval	opted by the members and th	e number of votes east f	or the amendment(s)	

•

豆	There are no memb- adopted by the boar	ers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.
	Dated _	09-19-2022 ——————————————————————————————————
	ŀ	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 (iduciary)
		JEREMIAH SIMS
		(Typed or printed name of person signing)
		PD

(Title of person signing)