13655

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ON KINGDOM OF JEHOVAR'S WITNESSES, INC.
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee	
Please return all correspondence concerning th	tis matter to the following:
Patrick Pahalan	
	(Name of Contact Person)
PLANTATION KINGDOM HALL OF JEHO	OVAH'S WITNESSES, INC.
	(Firm/ Company)
11351 West Broward Blvd.	
	(Address)
Plantation, FL. 33325	
	(City/ State and Zip Code)
ppahalan44@gmail.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter.	, please call:
Patrick Pahalan	(954) 599 7080
(Name of Contact	Person) at (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:	nade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing	Fee & S43.75 Filing Fee & S52.50 Filing Fee Status Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address Amendment Section	Street Address Amendment Section
Amendment Section	Amenament Section

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

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PLANTATION KINGDOM HALL OF JEHOVAH'S WITNESSES, INC.

(Name of Corporation as curr	ently filed with the Florida Dept. of S	State)	
N13655			
(Document Nur	mber of Corporation (if known)		
Pursuant to the provisions of section 617,1006, Florida Stati amendment(s) to its Articles of Incorporation:	utes, this Florida Not For Profit Corpo	oration adopts the following	
A. If amending name, enter the new name of the corpor	ation:		
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbr	The new eviation "Corp," or "Inc,"	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES.)	<u>S</u>)		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	11351 West Broward Blvd.	<u>»</u>	
	Plantation, FL. 33325	9	
		12	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		ne of the	
Name of New Registered Agent:		हुँदी क्ष	
New Registered Office Address:	(Florida street addre	ess)	
	, Florida		
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered liberary accept the appointment as registered agent. I am j		s of the position.	
	Signature of New Registered 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	V Mil	in <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Titk</u>	Name	Address
I) X Change	P	Luis Angel Velez	1500 NW 85 Ave.
Add			Plantation, FL 33322-46505
Remove			9 7
2) X Change	s	Patrick Wyndham Pahalan	6842 NW 12 Ct.
Add			Plantation, FL 33313-6025
Remove			٠ <u>٠</u>
3) Change	T	Michael Henry Rodriguez	10097 Cleary Blvd. # 293
X Add			Plantation, FL. 33324-5147
Remove			
4) Change	TD	Jeremy Hall	561 NW 75 Terr
Add			Plantation, FL 33317
X Remove			
5)Change			
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			

If amending or adding additional attach additional sheets, if necessar	y). (Be spec	ific)				
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	e date of each amendment(s) adoption: e this document was signed.	11/12/19	, if other than the
Eft	ective date <u>if applicable</u> :	バルルタリタ more than 90 days after amendment file	datc)
	te: If the date inserted in this block does no ument's effective date on the Department of		uirements, this date will not be listed as the
٩d	option of Amendment(s) (CI	IECK ONE)	
	The amendment(s) was/were adopted by the was/were sufficient for approval.	ne members and the number of votes cas	st for the amendment(s)
	There are no members or members entitled adopted by the board of directors.	I to vote on the amendment(s). The ame	endment(s) was/were
	Dated	1/19	
	Signature		
	have not been selected.	e chairman of the board, president or other by an incorporator – if in the hands of iduciary by that fiduciary)	
	L	vis Velez	
		(Typed or printed name of person si	gning)
	Pro	osident	
		(Title of person signing)	
			<u></u>