N14000002156

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SEP 2 4 2014 T. CARTER



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Eric Q. Tr	uss Ministri	es Inc.
DOCUMENT NUMBER: N1400002	156	
The enclosed Articles of Amendment and fee are subr	nitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Eric Q. Truss		
	(Name of Contact Persor	1)
	(Firm/ Company)	
2020 Blue Sky Dr		,
	(Address)	
Pensacola, FL 32506		
	(City/ State and Zip Code	e)
eldereqtruss@yal		
E-mail address: (to be used	•	notification)
For further information concerning this matter, please	call:	
Eric Q. Truss	_{at} 850	377-6059
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
\$35 Filing Fee \$\sum \text{S43.75 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	Amend Divisio Clifton 2661 E.	Address ment Section n of Corporations Building xecutive Center Circle

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

		14 SEP 17	PH I
(Name of Corporation as currently fi	iled with the Florida Dept. of State)		
N14000002156			
(Docume	ent Number of Corporation (if known)		
ursuant to the provisions of section 617.1006 mendment(s) to its Articles of Incorporation:		rofit Corporation adopts t	the foll
. If amending name, enter the new name	of the corporation:		
			Th
ame must be distinguishable and contain the Company" or "Co." may not be used in the		r the abbreviation "Corp.	." or '
B. Enter new principal office address, if ap Principal office address <u>MUST BE A STRE</u>			
•			
. Enter new mailing address, if applicable	le:		
	TICP, BUX1		
(Mailing address <u>MAY BE A POST OFF</u>			
(Mailing address <u>MAY BE A POST OF F</u>	· <u> </u>		_
(Mailing address <u>MAY BE A POST OF F</u>	·		
. If amending the registered agent and/or	r registered office address in Florida, ent	er the name of the	
	r registered office address in Florida, ent	er the name of the	
. If amending the registered agent and/or	r registered office address in Florida, ent	er the name of the	
. If amending the registered agent and/or new registered agent and/or the new reg	r registered office address in Florida, ent	er the name of the	
. If amending the registered agent and/or new registered agent and/or the new reg Name of New Registered Agent:	r registered office address in Florida, ent	er the name of the	
. If amending the registered agent and/or new registered agent and/or the new reg	r registered office address in Florida, ent gistered office address:	er the name of the	

Page 1 of 4

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	<u>V</u> <u>Mi</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	S	Mamie Hayes	13 S Chalk St
X Add			Quincey, FL 32351
Remove			
2) Change	<u>s</u>	Nuria Vassell	641 Spencer Ave
Add			Pensacola, FL 32514
X Remove			
3) Change			
Add			
Remove			
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)

This ministry is not organized, nor shall it operate, for pecuniary gain or profit, and it does not
contemplate the distribution of gains, profits, or dividends to its members and is organized solely
for non-profit purposes. The property, assets, profits and net income of this ministry is
irrevocably dedicated to charitable, educational and religious purposes and no part of the profits
or net income of this church shall never inure to the benefit of any profit shareholder or
individual. On the dissolution of winding up this ministry, its assets remaining after payment, or
provision of payment of, all debts and liabilities of this ministry shall be distributed to a non-
profit fund, foundation or corporation that is organized and operated for charitable, educational,
ecclesiastical, religious, or sacerdotal purposes and that has established its tax exempt status
under Section 501 (c) (3) of the Internal Revenue Code
FEIN 16-1749165

The date of each amendment(s) ac	loption:	, if other than the
late this document was signed.		•
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s)	
Dated Signature	man or vice chairman of the board, president or other officer-if directors	
have not bee	en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
Eric Q. Tru	ISS	
	(Typed or printed name of person signing)	
Pastor/Pre	sident	
-	(Title of person signing)	