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COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: ALblue!	Ministries Inc	L
NAME OF CORPORATION:	1077	
DOCUMENT NUMBER:	140000	07435
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
Adrian Blue		
	(Name of Contact Perso	n)
	(Firm/ Company)	
52 Riley Rd #341		
	(Address)	
Celebration, FL 34747		
	(City/ State and Zip Cod	e)
ALblueministries	s@amail.com	•
	used for future annual report	
For further information concerning this matter, ple	ase call:	
Adrian Blue	,,770	572-4457
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made	e payable to the Florida Depa	artment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Stat	a & ■\$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	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



ALDIUEIVIINISTRES, INC.					
(Name of Corporation as current	ly filed with the Flo	orida Dept.	of State)	
NIL	LODDI	207L	135	5	
(Documen	Number of Corpor	ration (if kn	own)		
resuant to the provisions of section 617. nendment(s) to its Articles of Incorporat		es, this <i>Flor</i>	ida Not I	For Profit Corpo	oration adopts the follo
If amending name, enter the new na	me of the corporat	tion:			
] [A					<i>The</i>
me must be distinguishable and contair Company" or "Co." may not be used in		ution" or "ii	- icorporal	ted" or the abbr	eviation "Corp." or "I
Enter new principal office address,	f applicable:		52	Riley R	b #341
rincipal office address <u>MUST BE A S</u>	TREET ADDRESS		'- Pa	· - () = ?	5 #341 34747
			CEKA	+(18m) 7) E	- 07/7/
Enter new mailing address, if appli	cable:	□[\		~	.
(Mailing address <u>MAY BE A POST (</u>	OFFICE BOX)		<u>52</u>	Kiley K	D #341 34747
		Ccle	BRAT	[bu \$2	34747
If amending the registered agent annew registered agent and/or the new	d/or registered offi	ice address	<u>in Florid</u>	a, enter the nar	ne of the
•		uduress:			
Name of New Registered Agent:					•
w Registered Office Address:		(Florida stree	t address)		-
	□ ſ A				
		1		, Florida	
	(City)	,		(Zip C	.ode)
ew Registered Agent's Signature, if ch					
ereby accept the appointment as registe	ered agent. I am fa	miliar with	and acce	pt the obligation	is of the position.
					_
Sign	nature of New Regis	stered Ageni	, if chans	eine	•

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 D Y Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			<u> </u>
Remove			
2) Change Add	T	RAPHARI STEWART	3103 TURNBERRY BIVD KISSIMME FL 34744
Remove 3) Change Add	D _		3103 TURNBERY BIVD KISSIMMER FL. 34744
Remove 4) Change Add	5	TONY COLOCE	
Remove			
5) Change Add Remove	D	ANTONIO COLACI	13/08 LAKEShore GROVEDE WINTEL GAZDEN, FL 34787
6) Change Add	<u>√S</u>	LAEbelle Blue	52 Riley RD 341 COBERTION FL 34747
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
Adding Article □III- Additional □ro⊑isions□□e	ee attac⊑ed

The date of each amendment(s) adoption: ULILULZULH					
Effe	ective date if applicable:				
	(no more than 90 days after amendment file date)				
A do	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.				
	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 10/1/2014 Signature Write Stup St.				
	(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)				
	Adrian Blue				
	(Typed or printed name of person signing)				
	□resident⊞irector				
	(Title of person signing)				