N14000001415

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SECRETARY OF STATE ON VISION OF CORPOR AT 2: 48

Amend Mamech 8 10 3/26/15

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION: TOUCH BY | 'AN ANGEL | WORSHIP CENTER |
|--|---|--|
| DOCUMENT NUMBER: N1400007 | 445 | |
| The enclosed Articles of Amendment and fee are subm | nitted for filing. | |
| Please return all correspondence concerning this matte | r to the following: | |
| NADINE E PETRIE | | |
| | (Name of Contact Perso | n) |
| VISION MIRACLE CHURCH | OF GOD INT | ERNATIONAL INC. |
| | (Firm/ Company) | |
| 5559 N STATE ROAD 7 | | |
| | (Address) | |
| FORT LAUDERDALE, F | L 33319 | |
| | (City/ State and Zip Cod | e) |
| TBAAHOMECAR | | |
| E-mail address: (to be used | for future annual report | notification) |
| For further information concerning this matter, please | call: | |
| NADINE E PETRIE | 954 | , 588-1188 |
| (Name of Contact Person) | | ode & Daytime Telephone Number) |
| Enclosed is a check for the following amount made page | yable to the Florida Depa | artment of State: |
| □ \$35 Filing Fee | □\$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 | | Address |
| Amendment Section Division of Corporations | Amendment Section Amendment Section Division of Corporations Division of Corporations | |
| P.O. Box 6327 | | Building |
| Tallahassee, FL 32314 | | Executive Center Circle |

Tallahassee, FL 32301



March 16, 2015

NADINE E. PETRIE TOUCH BY AN ANGEL WORSHIP CENTER INC 5559 N. STATE ROAD 7 FT. LAUDERDALE, FL 33319

SUBJECT: TOUCH BY AN ANGEL WORSHIP CENTER INC.

Ref. Number: N14000007445

We have received your document for TOUCH BY AN ANGEL WORSHIP CENTER INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

You failed to sign the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 915A00005294

RECEIVED 15 HAR 26, PH 12: 35 WESSERVED

Articles of Amendment to Articles of Incorporation of



TOUCH BY AN ANGEL WORSHIP CENTER INC.

| (Name of Corporation as current) N1400007445 | ly filed with the Flo | rida Dept. of State) | | _ ~ 4 |
|---|-----------------------|----------------------------------|---|-------------|
| | ument Number of Co | orporation (if known) | | |
| Pursuant to the provisions of section 617. amendment(s) to its Articles of Incorporat | | s, this <i>Florida Not For P</i> | rofit Corporation adopts th | e following |
| A. If amending name, enter the new na | me of the corporati | on: | | |
| VISION MIRACLE CHUR | RCH OF GOI | O INTERNATIO | NAL INC. | The new |
| name must be distinguishable and contain "Company" or "Co." may not be used in | | tion" or "incorporated" o | or the abbreviation "Corp.' | |
| B. Enter new principal office address, i | | 5559 N STATE | EROAD 7 | |
| (Principal office address MUST BE A ST | | FORT LAUDE | RDALE | _ |
| | | FL 33319 | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | 9607 PARK ROW | | |
| | | BOCA RATON, FL 33428 | | |
| | | | | _ |
| D. If amending the registered agent and new registered agent and/or the new | | | ter the name of the | |
| Name of New Registered Agent: NADINE PETRIE | | | | |
| | 9607 PARK RC | W, BOCA RATON, F | L 33428 | |
| New Registered Office Address: | | (Florida street address) | *** | |
| | FORT LAU | DERDALE | , Florida 33319 | |
| | (City) | | (Zip Cod | le) |
| New Registered Agent's Signature, if ch I hereby accept the appointment as registe | ered agent. I am/Jai | miliar with and accept the | | |
| | Signature of New | Registered Agent, if chang | ging | |

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 | V Mik | n Doe te Jones y Smith | |
|----------------------------------|-------|------------------------------|-----------------------|
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | VP | SEAN WILLIAMS | 1424 AVON LANE APT 11 |
| Add | | | NORTH LAUDERDALE |
| X Remove | | | FL, 33068 |
| 2) Change | VP | TENESHA N THOMAS | 3311 NW 67TH ST |
| Add | | | FORT LAUDERDALE |
| X | | | FL, 33309 |
| 3) Change | VP | BISHOP JULIETTE FAGAN | 9607 PARK ROW |
| X | | | BOCA RATON |
| Remove | | | FL, 33428 |
| 4) Change | VP | SHANTE BERRY | 9607 PARK ROW |
| X Add | | | BOCA RATON |
| Remove | | | FL, 33428 |
| 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) |
|---|
| |
| NEW NAME |
| VISION MIRACLE CHURCH OF GOD INTERNATIONAL INC. |
| 5559 N STATE ROAD 7, FORT LAUDERDALE, FL 33319 |
| |
| ADD VP |
| BISHOP JULIETTE FAGAN |
| 9607 PARK ROW, BOCA RATON, FL 33428 |
| |
| ADD VP |
| SHANTE BERRY |
| 9607 PARK ROW, BOCA RATON, FL 33428 |
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| | e date of each amendn this document was sig | | if other than the | | |
|-----|--|---|-------------------|--|--|
| | ective date <u>if applicab</u> | e: N/A | | | |
| | - | (no more than 90 days after amendment file date) | | | |
| Add | ption of Amendment | s) (<u>CHECK ONE</u>) | | | |
| | The amendment(s) was/were sufficient for | s/were adopted by the members and the number of votes cast for the amendment(s) r 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 3 | -2-2015 | | | |
| | Signature N | ADINE E PETRIE - PRESIDENT / L. Policie | | | |
| | ha | the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator — if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary) | | | |
| | NAD | NE E PETRIE | | | |
| | <u> </u> | (Typed or printed name of person signing) | | | |
| | PRE | SIDENT | | | |
| | | (Title of person signing) | | | |