N14 00000 9329

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TO: Amendment Section
Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

LAVANYA K NAME OF CORPORATION:	CELLY MINISTRIES, INC		
N14000009329			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee a	re submitted for filing.		
Please return all correspondence concerning thi	is matter to the following:		
LAVANYA KELLY THOMAS			
	(Name of Contact F	Person)	
LAVANYA KELLY MINISTRIES, INC			
· · · · · · · · · · · · · · · · · · ·	(Firm/ Compar	ıy)	
9020 NE 8TH AVENUE, UNIT 2D			
	(Address)		
MIAMI. FL 33138			
	(City/ State and Zip	Code)	
LKELLYMINISTRIES@GMAIL.COM			
E-mail address: (to	be used for future annual re	port notification	n)
For further information concerning this matter,	please call:		
LAVANYA KELLY THOMAS	а	305	757-4491
(Name of Contact		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount n	nade payable to the Florida	Department of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing F Certificate of S	Status	Certifi is Certif	0 Filing Fee ficate of Status fied Copy tional Copy is osed)
Mailing Address Amendment Section		treet Address mendment Sect	ion

Division of Corporations
The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

FILED

LAVANYA KELLY MINISTRIES, INC 2021 HAR 19 PM 3: 35 (Name of Corporation as currently filed with the Florida Dept. of State) N14000009329 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: LAVANYA THOMAS MINISTRIES, INC. name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. NΛ B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: NA (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: , Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations 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	PT John De V Mike Je SV Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add		NA	
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet	ng additional Art ets, if necessary).	icles, enter change(s) here: (Be specific)	
NA			
			-

		
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		<u> </u>
	2/10/2021	
The date of each amendment(s) addate this document was signed.	option: 3/10/2021	, if other
Effective date if applicable:		
Ziletilet date <u>it apparess</u> .	(no more than 90 days after amendment file date)	-
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory filing requirement partment of State's records.	ts, this date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	

adopted by th	ne board of directors.
Date	3/10/2021 ed
Sign	lature Lik Thomas
	(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)
	LAVANYA KELLY THOMAS
	(Typed or printed name of person signing)