N15000001492

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TO: Amendment Section Division of Corporations

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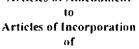
NAME OF CORPORATIO		R COVENANT FELLC	WSHIP IN	C.	5 Opt
	N15000001492				
The enclosed Articles of Am	endment and fee are subm	itted for filing.			
Please return all corresponde	nce concerning this matter	to the following:			
FRED D. GOODEN III					
	(Name of Contact Person	n)		
SONS OF ISSACHAR COV	ENANT FELLOWSHIP				
	,	(Firm/ Company)		.	
923 UNIVERSITY BLVD.	NORTH				
		(Address)			
JACKSONVILLE, FLORID	A 32211				
	(City/ State and Zip Cod	e)		
PASTORFREDGOODEN@	GMAIL.COM				
E-	mail address: (to be used	for future annual report	notification		
For further information conce	erning this matter, please c	call:			
FRED GOODEN		90 at	4	476-6634	
(Name of Contact Person)		ea Code)	(Daytime Telepl	none Number)
Enclosed is a check for the fe	illowing amount made pay	able to the Florida Depa	irtment of S	State:	
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi) Filing Fee leate of Status led Copy lional Copy is lised)	

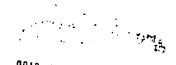
Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

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

Articles of Amendment





SONS OF ISSACHAR COVENANT FELLOWSHIP INC. (Name of Corporation as currently filed with the Florida Dept. of State) N15000001492 (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: SONS OF ISSACHAR COVENANT NETWORK 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. 923 UNIVERSITY BLVD, NORTH B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) JACKSONVILLE, FL. 32211 C. Enter new mailing address, if applicable: 923 UNIVERSITY BLVD, NORTH (Mailing address MAY BE A POST OFFICE BOX) JACKSONVILLE, FL. 32211 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: N/A , Florida _ (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	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>s</u>	SHANELLE C. PIOTIER	822 BRANDYWINE ST.
Add			JACKSONVILLE, FL. 32208
X Remove			
2) Change	<u>s</u>	ANGEL C. THOMAS	11824 SAGEBRUSH CT.
X Add			JACKSONVILLE, FL. 32218
Remove	CFO	SABINA F. GOODEN	1179 E. 15TH ST,
3) Change X Add			JACKSONVILLE, FL. 32206
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artication (attach additional sheets, if necessary).	(Be specific)			
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
JANUARY 3, 2018 Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dadocument's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (<u>CBECK ONE</u>)	
■ The amendment(s) was/were adopted by the members and the number of votes east for the amendm was/were sufficient for approval.	ient(s)
☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/w adopted by the board of directors.	vere
Dated JANUARY 3, 2018	
Signature Ital Down	
(By the chairman or vice chairman of the board, president or other officer-if direchards not been selected, by an incorporator – if in the hands of a receiver, trustee other court appointed fiduciary by that fiduciary)	
FRED D. GOODEN III	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	