N15000003030

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(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:K	INGOOM LIVING CH	vect Ive.			
DOCUMENT NUMBER: N15	**************************************				
The enclosed Articles of Amendment and	fee are submitted for filing.	•			
Please return all correspondence concerning	ng this matter to the following	;			
FRANKLIN SA	Name of Contac				
	(Name of Contac	t Person)			
KINGDOM LIVING	CHURCH INC.				
	(Firm/ Comp	eany)			
2463 MICHIGA	AUE. (Address				
	(Address)			
KIBSIMMEE	FL 34744 (City/ State and Z				
	(City/ State and Z	Cip Code)			
CAVEWALE 13 @	ADL. CON				
CAVEWOLF 13 @ E-mail address	(to be used for future annual	report notification)			
For further information concerning this ma					
- FRANKLIN SAUTO	5 SL.	at (407) 922-7462 (Area Code) (Daytime Telephone Number)			
(Name of Cor	itact Person)	(Area Code) (Daytime Telephone Number)			
Enclosed is a check for the following amo	unt made payable to the Floric	da Department of State:			
	iling Fee & \$\Bigcup \$\\$43.75 \text{ Filing F} \\ \text{e of Status} \text{Certified Copy} \\ \text{(Additional copenclosed)}	Certificate of Status			
Mailing Address		Street Address			
Amendment Section	c.	Amendment Section			

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

KINGDOM LIVING CHURCH	t INC	
	ly filed with the Florida Dept. of State)	
N 150000030	3.e	
(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit Corporation</i> add	opts the following
A. If amending name, enter the new name of the corporation	<u>on:</u>	
HEAVENLY GRACE CHURCH INC.		The new
MEAVENLY GLACE CHURCH LNC, name must be distinguishable and contain the word "corporati" (Company" or "Co." may not be used in the name.	on" or "incorporated" or the abbreviation "(Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		20 0
C. Enter new mailing address, if applicable:	74/2 NICHEAN AUG	一 一 一 一 二 一 二 一 二 一 二 一 二 二 二 二 二 二 二 二
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	2463 MICHIGAN AUE. KISSIMMEE, FZ 34744	——————————————————————————————————————
	KISSIMMEE, FL 34744	- 35
D. If amending the registered agent and/or registered office	e address in Florida, enter the name of the	
new registered agent and/or the new registered office ad		
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	. Florida	
	(City) (Zip C	ode)
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam		osition.
Sig	gnature 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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		_	····
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change		<u> </u>	
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Remove			
4) Change			
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Remove			
5) Change			
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6) Change			
Add			
Remove			

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The date of each amendment(s) adoption:date this document was signed.	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this block does not meet the applicable statutory filin document's effective date on the Department of State's records.	ng requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of vot was/were sufficient for approval.	tes cast for the amendment(s)
There are no members or members entitled to vote on the amendment(s). The adopted by the board of directors.	ne amendment(s) was/were
Dated 01-04-2017	
Signature Full Ste S.	
(By the chairman or vice chairman of the board, president have not been selected, by an incorporator – if in the han other court appointed fiduciary by that fiduciary)	
FRANKLIN SANTOS SE	
(Typed or printed name of per	son signing)
EXECUTIVE DILECTOR, P.	RESIDENT
(Title of person sig	gning)