## N15000006422

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## COVER LETTER

TO: Amendment Section Division of Corporations 2010 HAR -8 PM 3: 35 RealOrang International Mini ries, Inc. NAME OF CORPORATION: N15000006422 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ann Peterson (Name of Contact Person) RealOrang International Ministries, Inc. (Firm/ Company) PO Box 781953 (Address) Orlando, FL 32878 (City/ State and Zip Code) realorang@realorang.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ann Peterson 8492089 239 (Name of Contact Person) (Daytime Telephone Number) (Area Code) Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee ■ \$43.75 Filing Fee & ■ \$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status

Mailing Address

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

Street Address

(Additional copy is

enclosed)

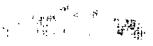
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certified Copy

Enclosed)

(Additional Copy is

## Articles of Amendment to Articles of Incorporation of .



2010 MAR -8 PM 3: 35 RealOrang International Ministries, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N15000006422 (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: RealOron International 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. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) X Change	S	Holly Stucki	825 Santa Barbara Blvd - #402	
Add			Cape Coral, FL	
Remove			33991	
2) X Change	S	Susan Bain	825 Santa Barbara Blvd - #305	
Add			Cape Coral, FL	
Remove			33991	
3) X Change	S	Steve Kolody	3735 Evans Avenue	
Add			Fort Myers, FL 33901	
Remove				
4) Change	x	Bill Lindsy	12780 Kenwood Lane - #203	
_X_Add			Fort Myer, FL 33907	
Remove				
5) X Change	Pn	Ann Peterson	3549 AlaFaya Paus D	
Add		`	Ovland-FL 32828	
Remove				
6) Change			· ———	
Add				
Remove				

if amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
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The	e date of each amendment(s) adoption:	, if other than the
late	e this document was signed.	
effe	ective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we cument's effective date on the Department of State's records.	ill not be listed as the
\ <b>d</b> c	option of Amendment(s) ( <u>CHECK ONE</u> )	
	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.	
	Signature  (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)	<del></del>
	Ann Peterson	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	