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| (Re | questor's Name) | |
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| (Cit | ry/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE
ALLAHASSEE OF STATE

CC

OCT 22 2015

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

| Shift to the Power Outreac NAME OF CORPORATION: | h Ministries , \ | MC. | |
|--|---|--------------------|---|
| N15000007858 | | | |
| DOCUMENT NUMBER: | | | |
| The enclosed Articles of Amendment and fee are submitted | for filing. | | |
| Please return all correspondence concerning this matter to the | ne following: | | |
| Dorothy Bell | | | |
| (Nam | ne of Contact Per | rson) | |
| Shift to the Power Outreach Ministries 1 LNC | | • | |
| (| Firm/ Company |) | |
| 12415 Westhampton Circle | | | |
| | (Address) | | |
| Wellington FL 33414 | | | |
| (City/ | State and Zip C | Code) | |
| willielawrence33@yahoo.com | | | |
| E-mail address: (to be used for fu | iture annual repo | ort notification |) |
| For further information concerning this matter, please call: | | | |
| Willie Lawrence | at | 561 | 261- 2706 |
| (Name of Contact Person) | | (Area Code) | (Daytime Telephone Number) |
| Enclosed is a check for the following amount made payable | to the Florida D | epartment of S | itate: |
| (Ac | 3.75 Filing Fee & rtified Copy dditional copy is closed) | Certifi Certifi | Priling Fee cate of Status ed Copy ional Copy is sed) |

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 to Articles of Incorporation of

| Shift to the Power Outreach Ministries 11 MC. | | |
|--|--------------------------------|---|
| (Name of Corporation as curre | ntly filed with the Flor | ida Dept. of State) |
| N15000007858 | | |
| (Document Num | ber of Corporation (if k | nown) |
| Pursuant to the provisions of section 617.1006, Florida Statut mendment(s) to its Articles of Incorporation: | es, this <i>Florida Not Fo</i> | r Profit Corporation adopts the following |
| . If amending name, enter the new name of the corpora | tion: | |
| name must be distinguishable and contain the word "corpora | ation" or "incorporated | The new I" or the abbreviation "Corp." or "Inc." |
| Company" or "Co." may not be used in the name. | anon o mosperano | ог, по постоя от р |
| Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u> | | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | 70.2 |
| | | S OF |
| | | 12 |
| | | 550 |
| If amending the registered agent and/or registered off new registered agent and/or the new registered office | | enter the name of the |
| Name of New Registered Agent: | | 2: 22 |
| | | lorida street address) |
| New Registered Office Address: | (r. | oriaa sireei aaaress) |
| | | . Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am for | | the obligations of the position. |
| | | |
| | Signature of New Regis | tered 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)ChangeAdd | | _ | |
| Remove 4) Change Add Remove | | | |
| 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) |
|---|
| Declaration added by this Board is as follow Under penalties of perjury, I declare that I have examined this information, |
| including accompanying documents, and to the best of my knowledge and belief, the information contains all the relevant |
| facts relating to the request for the information, and such facts are true, correct, and complete. per Revenue Procedure 2013-4 |
| |
| The language added by this Board permanently dedicating our assets specifically described in Section 501(c)(3) as required |
| for tax exemption as an organization described under section 501(c)(3). The provisions included in our Articles of Incorport |
| is as follow. Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within |
| the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, |
| or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets |
| not disposed of shall be disposed of by a court of competent jurisdiction in the county in which the principal office of the |
| organizations is then located, exclusively for such purposes or to such organization or organizations, as said Court shall |
| determine, which are organized and operated exclusively for such purposes. |
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| October 14, 2015 | |
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| it(s) adoption: | , if other than the |
| d. | |
| November 14, 2015 | |
| | |
| (no more than 90 days after amendment file date) | |
| | ot be listed as the |
| the Department of State's records. | |
| (<u>CHECK ONE</u>) | |
| were adopted by the members and the number of votes cast for the amendment(s) pproval. | |
| r members entitled to vote on the amendment(s). The amendment(s) was/were directors. | |
| ber 14, 2015 | |
| Forothy Bell | |
| e chairman or vice chairman of the board, president or other officer-if directors | |
| not been selected, by an incorporator - if in the hands of a receiver, trustee, or | |
| court appointed fiduciary by that fiduciary) | |
| orothy Bell Borothy B. Bell | |
| (Typed or printed name of person signing) | |
| resident | |
| (Title of person signing) | |
| | November 14, 2015 (no more than 90 days after amendment file date) his block does not meet the applicable statutory filing requirements, this date will not the Department of State's records. (CHECK ONE) were adopted by the members and the number of votes cast for the amendment(s) pproval. r members entitled to vote on the amendment(s). The amendment(s) was/were directors. ber 14, 2015 Characteristic directors and the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary) orothy Bell Characteristic days and incorporator of person signing) resident |