## N15000011155

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DIVISION OF CORFORATIONS

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## COVER LETTER

PEARL'S NON-PROCIT ORGANIZATION INCORP NAME OF CORPORATION: N 150000 11155 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Firm/ Company) 5739 SPANISH POINT CT. PWISIC hofmail. Com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Williams at Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \$\Bigcup \$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Street Address **Mailing Address** 

TO: Amendment Section Division of Corporations

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

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

## Articles of Amendment

Articles of Amendment
to Articles of Incorporation
PEARL'S NON-PROGIT ORGANIZATION INCORPORATION
(Name of Corporation as currently filed with the Florida Dept. of State)
N 15000011155
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
PEARL MiniSTRIES INTERNATIONAL NON-PROPERTY THE NEW INCORDINATIONAL
A. If amending name, enter the new name of the corporation:  PEAR L MINISTRIES INTERNATIONAL WON-PROFIT CORPORATION AL MON-PROFIT THE NAME OF 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)    Mailing address MAY BE A POST OFFICE BOX)
(Mulling address MAT BE A POST OFFICE BOX)
22 27 CO
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:
new registered agent and/or the new registered office address:
Name of New Registered Agent: NA
WIA
New Registered Office Address:  (Florido street address)
A / / A
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
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 Do V Mike Jo SV Sally Sı	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	CEO	PATRICI A N. WILLIAM	palmetto, FLA.34221
<b>X</b> Add			Palmetto, +LA.34221
Remove			
2) Change			N/A
Add			1
Remove			0//0
3 ) Change			
Add			
Remove			
4) Change			N/A
Add			
Remove			
5) Change			N/A
Add			
Remove			
6) Change			N/A
Add			
Damoua			

E. If amending or adding additional Articles, enter change(s) here:	
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
m / /	
N/A	
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	** ***********************************
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. The date of each amendment(s) adoption	n: August 17, 2016	if other than th
date this document was signed.	N/A	SECRETARY OF STATE BYTSION OF CORPORATION
Effective date if applicable:	(no more than 90 days after amendment file date)	2016 AUG 22 PM 12: 50
Note: If the date inserted in this block doe document's effective date on the Departme	es not meet the applicable statutory filing requirement of State's records.	its, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the	e amendment(s)
There are no members or members en adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment	(s) was/were
Dated	ugust 17,2016	
Signature	Papes	
have not been sele	r vice chairman of the board, president or other offic cted, by an incorporator – if in the hands of a receive ted fiduciary by that fiduciary)	
	PATRICIA Willia	Ims
	(Typed or printed name of person signing)	
	CEO / Regis	HERMG AGENT
	(Title of person signing)	