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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPORATION: Linda Pearson International Ministry Inc.  |
|---|
| DOCUMENT NUMBER: 1160000135)  |
| The enclosed Articles of Amendment and fee are submitted for filing.  |
| Please return all correspondence concerning this matter to the following:   |
| Lindo M Pearson (Name of Contact Person)  |
| Linda Pearson International Ministry Inc. (Firm/Company)  |
| 2903 Tropic Blud (Address)  |
| (Address)   |
| Fort Pierce Fl 34946<br>(City/ State and Zip Code)  |
| (City/ State and Zip Code)  |
| 10ministryine Caol. Com E-mail address: (to be used for future annual report notification)  |
| For further information concerning this matter, please call:  |
| Linda M Pearson at 772 595-2466 (Name of Contact Person) (Area Code) (Daytime Telephone Number)   |
| (Name of Contact Person) (Area Code) (Daytime Telephone Number)   |
| Enclosed is a check for the following amount made payable to the Florida Department of State:   |
| S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  S43.75 Filing Fee Certified Copy (Additional Copy is Enclosed)  S52.50 Filing Fee Certified Copy (Certified Copy (Additional Copy is Enclosed) |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee   |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment

to

## Articles of Incorporation of

| Linda Pearson Internationa  | I Ministry Inc.   |
|---|---|
| (Name of Corporation as currently filed with the Florida  | Dept. of State)   |
| U16000001351  |   |
| (Document Num   | ber of Corporation (if known)   |
| Pursuant to the provisions of section 617,1006, Florida Statu amendment(s) to its Articles of Incorporation:    | tes, this Florida Not For Profit Corporation adopts the following   |
| A. If amending name, enter the new name of the corpora  | tion:   |
|   | The new   |
| name must be distinguishable and contain the word "corpore" (Company" or "Co." may not be used in the name.     | Number of Corporation (if known)  Statutes, this Florida Not For Profit Corporation adopts the following reporation:  The new orporation" or "incorporated" or the abbreviation "Corp." or "Inc."  RESS)  ed office address in Florida, enter the name of the office address:  (Florida street address)  (Florida |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS        |   |
| (Principal office address MOST BE A STREET ADDRESS  |   |
|   | (c.)  |
|   |   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)                         | <u></u>   |
|   |   |
|   |   |
|   |   |
| D. If amending the registered agent and/or registered off new registered agent and/or the new registered office |   |
| Name of New Registered Agent:   |   |
|   |   |
|   | (Florida street address)  |
| New Registered Office Address;  |   |
|   |   |
|   | (City) (Zip Code)   |
| New Registered Agent's Signature, if changing Registered  | d Agent:  |
| I hereby accept the appointment as registered agent. I am for   | amiliar 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     | PT John D<br>V Mike Jo<br>SV Sally S | ones   |                                      |
|--------------------------------------|--------------------------------------|--|--------------------------------------|
| Type of Action (Check One)           | Title                                | Name   | Address                              |
| 1) Change Add                        | <u>4 b</u>                           | Women of Standard<br>Empowement Ministry Ins | 2903 Tropic Blod<br>H perce F1 34444 |
| Remove                               |                                      | _  | 2903 Troper Blod                     |
| 2) Change Add                        | Λb                                   | Doughters of Jeruscher                       | n Ft Pierce F1 3494                  |
| Remove 3 ) Remove     Add     Remove |                                      |  |                                      |
| 4) Change Add                        |                                      |  |                                      |
| Remove                               |                                      |  |                                      |
| 5) Change Add                        |                                      |  |                                      |
| Remove                               |                                      |  |                                      |
| 6) Change Add                        |                                      |  |                                      |
| Remove                               |                                      |  | <del></del>                          |
| F. If amending or additional sheet   |                                      | icles, enter change(s) here: (Be specific)   |                                      |
| EIN#                                 | 81-131                               | 9541   | <del></del>                          |
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|  | 8/2/20   |                      |
| The date of each amendment(s) adoption:  | Y/2/20   | , if other than the  |
| date this document was signed.   |  |                      |
| C  | 8/ 2/20  |                      |
| Effective date if applicable:  | / A/ V   | <u></u>              |
| (no n  | nore than 90 days after amendment file date)   |                      |
| Note: If the date inserted in this block does not document's effective date on the Department of | t meet the applicable statutory filing requirements, this date will f State's records. | not be listed as the |
| Adoption of Amendment(s) (CH   | HECK ONE)  |                      |
| <b>5</b> 10  | ha mambare and the number of value eact for the amondmentics                           |                      |
| The amendment(s) was/were adopted by the was/were sufficient for approval.                       | he members and the number of votes cast for the amendment(s)                           |                      |

|          | mbers or members entitled to vote on the amendment(s). The amendment(s) was/were loard of directors.   |
|----------|--|
| Dated    | 8/17/20  |
| Signatur | (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) |
|          | Linda m Pearson (Typed or printed name of person signing)  |
|          | President  |