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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: The Florida Brown Faith Temple C.O. G.I.C. DOCUMENT NUMBER: N1600001643 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: William Leon Lockhart
(Name of Contact Person) G's Victory International LLC
(Firm/Company) 5401 S. Kirkman RD. Suite 310 Orlando, FL, 32819
(City/State and Zip Code) For further information concerning this matter, please call: William Leon

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 (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

Mailing Address

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

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroc Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

| The Florida Brown taith lemple C.O.G.I.C. International | inc. |
|--|-----------------|
| (Name of Corporation as currently filed with the Florida Dept. of State) | 75. 3 |
| N16000001643 | |
| (Document Number of Corporation (if known) | 2 |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the fol amendment(s) to its Articles of Incorporation: | lowing |
| A. If amending name, enter the new name of the corporation: The Florida Brown Faith 7 | emp. |
| A. If amending name, enter the new name of the corporation: The Florida Brown Faith 7 Sierra Leone C.O.G.I.C. International Inc. The mame must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Company" or "Co." may not be used in the name. | 'Inc.'' |
| B. Enter new principal office address, if applicable: 5401 S. Kirkman KD Sy (Principal office address MUST BE A STREET ADDRESS) Orlando FL 32819 | <u>ite</u> — |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Syite 310 Orlando, FL, 32819 | |
| 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: William Leon Lockhart 54015 Kirkman RD Suite 310 | - |
| New Registered Office Address: Orlando Florida Street address) (City) Florida 328 (Zip Code) | |
| (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. | |
| Wm J. Soderart Signature of New Registered Agent, if changing | |
| o visit and an experience of the companies of the compani | |

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 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 | | Doc Jones Smith | |
|------------------------------------|-------------------|--|---|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change Add | \mathcal{D}_{-} | Moble Holmes | 4630 S. Kirkman RD Orlando FL, 32817 |
| Remove 2) Change Add | | James Watkins | 4630 S. Kirkman Rd Oriando FL 32811 |
| Remove 3) Remove Change Add Remove | | Edward L. Tate | 4630 S. Kirkman Ra Grland o FL 32811 |
| 4) Change Add | <u>D_</u> | Micheal Y. Anthony | Oclando FL 32 819 |
| Remove 5) Change Add | DAP | James O. Johnson JR. | 5401 S. Kirkman RD. Orlando FL 32819 |
| Remove 6) X Change Add Remove | D | Annette M. Dedeaux D. Melanie Tatum | 5401 S. Kirkman RD St Orlando FL 32819 5401 S. Kirkman RD S |
| E. If amending or | | rticles, enter change(s) here: | Orlando FL 32819 |
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| date this document was signed. | loption: | , if other than th |
| date this document was signed. | | |
| Effective date if applicable: | (no more than 90 days after amendme | |
| | (no more than 90 days after amendme | ent file date) |
| Note: If the date inserted in this blo document's effective date on the De | | ing requirements, this date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amount of the section | logged by the march are and discount of | nto a sect for the engador = 4 a |
| The amendment(s) was/were a was/were sufficient for approv | dopted by the members and the number of void. | otes cast for the amendment(s) |

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were