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COVER LETTER

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Tallahassee, FL 32314

<u>.</u>	OVER LETTER .
TO: Amendment Section Division of Corporations	OVER LETTER useb of the Living God, ERC, Inc.
God's House of Prayer Ch	itell of the Living viole, 1 icc.
N16000003110 DOCUMENT NUMBER:	··
The enclosed Articles of Amendment and fee are submitted	for filing.
Please return all correspondence concerning this matter to t	ne following:
Kathy M. Wright	i,
(Nan	e of Contact Person)
God's House of Prayer Church of the Living God, FRC. Inc	
	Firm/ Company)
Post Office Box 4131	
	(Address)
Tallahassee, Florida 32315	
(City	State and Zip Code)
godshouseofprayer3@yahoo.com E-mail address: (to be used for f	iture annual report notification)
For further information concerning this matter, please call:	
Kathy M. Wright	850 345-2018 at
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a cheek for the following amount made payable	to the Florida Department of State:
(A	3.75 Filing Fee & S52.50 Filing Fee certified Copy Iditional copy is closed) Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

	Articles of Amendment		
A	to Articles of Incorporation		2
^	of		%./ /
od's House of Prayer Church of the Living God, FRC	`, Inc.		19 19 19 19 19 19 19 19 19 19 19 19 19 1
(Name of Corporation as c	currently filed with the Flor	ida Dept. of State)	
16000003110			. 2
(Document	Number of Corporation (if ki	nown)	
ersuant to the provisions of section 617,1006, Florida nendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	r Profit Corporation adopts	the following
If amending name, enter the new name of the cor	poration:		
			The new
ame must be distinguishable and contain the word "co Company" or "Co." may not be used in the name.		or the abbreviation Corp	or mc.
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDI</u>			
. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u> </u>		
. If amending the registered agent and/or registere	ed affian addenne in Ulasida.	antor the name of the	
new registered agent and/or the new registered o		enter the name of the	
· ·			
Name of New Registered Agent:			
New Registered Office Address:	<i>eFh</i>	orida street address)	
		Florida	
	(City)	(Zip Code)	
ew Registered Agent's Signature, if changing Regis			
hereby accept the appointment as registered agent. $\ I$	am familiar with and accept	the obligations of the positio	on.
	Signature of New Regist	ered Avent 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	\underline{V} Mik	t Doe c Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Т	Min. Annie D. Nolen	Post Office Box 158
X Add			Gretna, Florida 32332
Remove			
2) Change	<u></u>	Prophetess Emma Paremore	4768 Woodville Hwy.
Add			Apt. 814
X Remove			Tallahassee, FL 32305
3.) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			_
Add			
Remove			
6) Change			
Add			
Remove			

(attach additional sheets, if necessary).— (Be specific)
The corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such
purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the
Internal Revenue Code, or the corresponding section of any furture federal tax code.
(A) The corporation is organized to provide food, shelter, and mentoring to the homeless and low-income families in the
Leon County and surrounding areas of Florida.
(B) The corporation will provide programs to bridge the digital divide, promote literacy, increase high school graduation
rates and supportive programs for low or no income individuals.
(C) The corporation will cater to disoriented families through networks and referrals.

E. If amending or adding additional Articles, enter change(s) here:

The date of each amendment(s) a date this document was signed.	doption:	if other than the
Effective date if applicable:		
гиссия часе <u>и аррисамс</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the D	ock does not meet the applicable statutory filing requirements, this date will not be epartment of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a was/were sufficient for approx	adopted by the members and the number of votes east for the amendment(s) ral.	
There are no members or men adopted by the board of direct	nbers entitled to vote on the amendment(s). The amendment(s) was/were tors.	
Dated _//_	12-2019	
Signature 6	Ly M. Wright	_
(By the chat have not be	irman or vice chairman of the board, president or other officer-if directors een selected, by an incorporator - if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
Ka	Hym. Wright (Typed of printed name of person signing)	
	PHESiden P	
	(Title of person signing)	