MIG OCCCC 7940

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COVER LETTER

TO: Amendment Section Division of Corporations

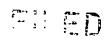
Loving Life Church of God, Inc NAME OF CORPORATION:	<u> </u>
N16000007940	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Miltaelena Vega	
(Name of Contact Person)	
Brandon Chapel Church of God , Inc	
(Firm/ Company)	
2909 John Moore Rd.	
(Address)	
Brandon Florida 33511	
(City/ State and Zip Code)	
miltavega01@gmail.com	
E-mail address: (to be used for future annual report notific	cation)
For further information concerning this matter, please call:	
Miltaelena Vega 813-	841-9347
	ode) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Departme	ent of State:
Certificate of Status Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy 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. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



Loving Life Church of God, inc			2021.CED 03. Ett. 007
Name of Corporation as currently filed with the	Florida	Dept. of State)	2021 SEP 27 FH 3:20
N16000007940			· · · · · · · · · · · · · · · · · · ·
(Docume	nt Numl	ber of Corporation (if known)	ALLE DOES, FE
Pursuant to the provisions of section 617,1006, Floridament(s) to its Articles of Incorporation:	da Statui	tes, this <i>Florida Not For Profit Co</i>	orporation adopts the following
A. If amending name, enter the new name of the	<u>corpora</u>	tion:	
Brandon Chapel Church of God , Inc			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	"согрого	ution" or "incorporated" or the a	bbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicab (Principal office address MUST BE A STREET AD	le: ODRESS	2909 John Moore Rd.	
		Brandon Fl. 33511	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	OX)	2909 John Moore Rd.	
		Brandon Fl. 33511	
D. If amending the registered agent and/or regist	ered of	fice address in Florida, enter the	name of the
new registered agent and/or the new registere	<u>d office</u>	address:	
Name of New Registered Agent:	N/A		
-	·	(Florida street i	uddress)
<u>New Registered Office Address:</u>	N/A		Mari Ja
-	•	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing R. I hereby accept the appointment as registered agent.	egistere . I am f	d Agent: amiliar with and accept the obliga	itions of the position.
_		Signature of New Registered Agen	t, 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 S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) N/A Change Add			
Remove			
2) Change Add			
Remove 3) Remove 4 Add 4 Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional she	ng additional Art ets, if necessary).	ticles, enter change(s) here: (Bc specific)	
N/A			
			
			

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			<u> </u>
	 		
	-		
The date of each amendment(s) ado date this document was signed.	ption: 9/23/21		, if other than the
Effective date if applicable: 9/23/2	I		
Effective date it applicable.	(no more than 90 days o	after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department.	c does not meet the applicab artment of State's records.	le statutory filing requirements,	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were add was/were sufficient for approval.		e number of votes cast for the a	mendment(s)

1	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	9/23/21 Dated
	Signature (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)
	Miltaelena Vega
	(Typed or printed name of person signing)
	Administator
	(Title of person signing)