## N1700000 1364

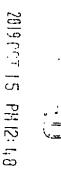
(Re	questor's Name)	<u> </u>
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PICK-UP	MAIT	MAIL
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Certified Copies	Certificate	s of Status
Special Instructions to	Filina Officer:	

Office Use Only



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## **COVER LETTER**

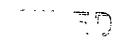
TO: Amendment Section **Division of Corporations** 

> P.O. Box 6327 Tallahassee, FL 32314

First Step Ministri NAME OF CORPORATION:	ies, Inc.	_			
N17000001364 DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are st	ubmitted for filing.				
Please return all correspondence concerning this ma	atter to the following	;			
Timothy Hadley					
	(Name of Contact	t Person)			
First Step Ministries, Inc.					
	(Firm/ Comp	any)			
627 Williams Street					
	(Address	)			
Melbourne, FL 32901					
	(City/ State and Z	ip Code)			_
tirstepministries3@gmail.com					
E-mail address: (to be us	sed for future annual	report not	ification	1)	
For further information concerning this matter, pleas	se call:				
Timothy Hadley		321		355-9514	
(Name of Contact Person	on)		Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amount made	payable to the Florid	la Departn	nent of	State:	
□ \$35 Filing Fee  □\$43.75 Filing Fee & Certificate of Status			Certifi Certifi	D Filing Fee icate of Status icd Copy tional Copy is sed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Ad Amendme Division o Clifton Bu	nt Secti f Corpo		

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



First Step Ministries, Inc.

2019 007 15 PM 12: 48

(Name of Corporation as o	currently filed with the Flor	ida Dept. of State)
N17000001364		
(Document	Number of Corporation (if kr	юмп)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	r Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	rporation:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated	l" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<b>.</b>	
(Stating duaress STAT BE A POST OFFICE BOX	<u> </u>	
D. If amending the registered agent and/or registere	ed office address in Florida,	enter the name of the
new registered agent and/or the new registered o	ffice address:	
Name of New Registered Agent:		
New Registered Office Address:	(Fle	orida street address)
ten registered office marea.		
_	(City)	, Florida (Zip Code)
	•	(34)
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I		the obligations of the position.
	y	G y /
	Signature of New Registe	ered 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>c</u>	Ce Ce Freeman	401 WALKER ST
A <b>đ</b> d			MELBOURNE FL 32901
X Remove			···
2) Change	<u>s</u>	Marguerite Jones	3222 Haddon Ave NE
X Add			Palm Bay, FL 32905
Remove			
3 ) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)			
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The date of each amendment(s) adoption:	_, it other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Dated Oct. 10th 2019	
Signature (By the 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)	_
Timothy Hadley (Typed or printed name of person signing)	
President	
(Title of person signing)	