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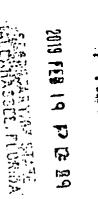
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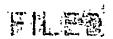
TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	Life Church International	Inc.	
N170 DOCUMENT NUMBER:	00003126		
The enclosed Articles of Amendment	and fee are submitted for fi	ling.	
Please return all correspondence conce	rning this matter to the foll	owing:	
Rev. Reno L Johnson			
	(Name of C	Contact Person)	
Total Life Church International Inc.			
	(Firm/	Company)	
442 Los Altos Way Unit:203			
	(A)	idress)	· · · · · · · · · · · · · · · · · · ·
Altamonte Springs, Fl 32714			
	(City/ State	and Zip Code)	
churchtotallife@gmail.com			
E-mail addr	ess: (to be used for future a	nnual report notific	ation)
For further information concerning this	matter, please call:		
Rev. Reno L Johnson		(407) at	745-0291
(Name of	Contact Person)	(Area Co	de) (Daytime Telephone Number)
Enclosed is a check for the following a	mount made payable to the	Florida Departmen	it of State:
	5 Filing Fee & 🗆\$43.75 F cate of Status — Certified (Addition enclosed	Copy Copy is Copy in C	52.50 Filing Fee fertificate of Status fertified Copy Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporat P.O. Box 6327	ions	Street Addro Amendment : Division of C Clifton Build	Section Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Total Life Church International Inc.

Total time Gitaen international file.		
(Name of Corporation as curren	tly filed with the Florida De	or of State is 19 P In 29
N17000003126		1010 1 1 4 4 4 Em 17 4
(Document Numb	er of Corporation (if known)	HALLARASSEE, PLUSTOA
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit</i>	Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:	
N/A		The new
name must be distinguishable and contain the word "corporal "Company" or "Co." may not be used in the name.	tion" or "incorporated" or th	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS))	
	·	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered offic	re address in Florida, enter t	he name of the
new registered agent and/or the new registered office a		The state of the s
Name of New Registered Agent:		
New Registered Office Address:	(Florida stre	ret address)
New Neglines ed 37fice Address.		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent. I am far		igations of the position.
Si	gnature of New Registered Ag	ent, 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>Y</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>neş</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
2) Change Add		_	· · · · · · · · · · · · · · · · · · ·	
Remove 3) Change		_		
Add				
4) Change Add		_		
Remove				
5) Change Add		-		
Remove				
6) Change Add		-		
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

	N/A	
The date of each amendment	(s) adoption:	_, if other than the
date this document was signed		
	Date this document is signed	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date will not be be be because of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK_ONE</u>)	
The amendment(s) was/w was/were sufficient for ap	rere adopted by the members and the number of votes east for the amendment(s) oproval.	
There are no members or adopted by the board of c		
Dated 2	113/2019	
(By the	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	_
Re	no I. Johnson	
_	(Typed or printed name of person signing)	
p_{re}	esident	
	(Title of person signing)	