N1700000 3328

(Re	questor's Name)	<u>-</u> -
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	VERSITY, INC		
N17000003328 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted			
Please return all correspondence concerning this matter to	the following:		
ELISEO RODRIGUEZ			
: (Nai	ne of Contact Perso	on)	
	(Firm/ Company)	<u> </u>	
1081 NE 36 AVENUE			
	(Address)		
HOMESTEAD, FL 33033			
(Cių	/ State and Zip Co	de)	
info@lwcuniversity.org			
E-mail address: (to be used for	future annual repor	t notification	
For further information concerning this matter, please call:			
GLORIA S RUIZ		05	557-1588
(Name of Contact Person)	(A	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payabl	e to the Florida De	partment of S	tate:
(A	13.75 Filing Fee & ertified Copy additional copy is aclosed)	Certific Certific	Filing Fee ate of Status d Copy onal Copy is ed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	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

CRISTIAN ZION UNIVERSITY, INC.

(Name of Corporation as currently filed with th	e Florida	Dept. of	State)	
N17000003328				
(Docum	nent Numb	ber of Co	erporation (if known)
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statut	tes, this I	Florida Not For Pro	ofit Corporation adopts the following
A. If amending name, enter the new name of th LIVING WORD CHRISTIAN UNIVERSITY, IN		tion:		The new
name must be distinguishable and contain the word "Company" of "Co." may not be used in the nam		ution" or	"incorporated" or	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE		1439 WEST FLAGLER ST		
		MIAMI, FL 33135		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			WEST FLAGLER S	ST
		——————————————————————————————————————	II, FL 33135	
D. If amending the registered agent and/or reginew registered agent and/or the new register				r the name of the
Name of New Registered Agent:	ELISEO			
Name of New Registered Agent.	1081 NE 36 AVENUE			
New Registered Office Address:			(Florida	street address)
	HOMES	TEAD		, Florida
		(City))	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent			ith and accept the c	obligations of the position.
		0	-6-5	7
_	S	lignature	of New Registered	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 Do Mike Jo Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change Add		_		
Remove				
2) Change Add		_		
Remove 3) Remove — Add — Remove		_		
4) Change Add		- -		
Remove				
5) Change Add		_		
Remove				
6) Change Add		_		
Remove				
E. If amending or additional sheet	ng additi ets, if nec	onal Art essary).	icles, enter change(s) here: (Be specific)	
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The date of each amendment(s) adoption	n:			, if other than the
date this document was signed. 07/01/2020	n			
Effective date if applicable:	(no more than 90 days o	after amendment file	date)	
Note: If the date inserted in this block doe document's effective date on the Department	es not meet the applicab			not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were adopted was/were sufficient for approval.	by the members and th	e number of votes ca	st for the amendment(s)	

There are no membadopted by the boo	pers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.
Dated	07/01/2020
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)
	ELISEO RODRIGUEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)