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-	(Requestor's Name)
	(Address)
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	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
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A. Butler 10/20/21

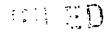
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NEW LIFE DIS COVERY CHURCH OF GOD, INC.
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following.
NADINE VALENTINE (Name of Contact Person)
(Name of Contact Person)
w/A
(Firm/ Company)
979 RALEIGH ROAD SE PALM BAY, FL 32909 (Address)
PACM BAY, FL 32909 (City/State and Zip Code)
Valentine n4@ gmail. com E-mail address. (to be used for future annual report notification)
For further information concerning this matter, please call:
NADINE UALENTINE at 321 557 4208 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State;
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status
Mailing Address Amendment Section Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of



NEW CITE DISCOVERY CF	FURCH OF	GOD	n to kind where
(Name of Corporation as currently filed with the Florida		FATT CO	1
N(700000 3573 (Document Numb			07.8 (A) =
(Document Numb	per of Corporation (if k	nown) [[]].	_ 1 1 1 1
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fo</i>	or Profit Corporati	on adopts the following
A. If amending name, enter the new name of the corpora	tion:		
NEW LIFE DISCOVERY name must be distinguishable and contain the word "corpora	CHURCH	INC.	The new
name must be distinguishable and contain the word "corpora" (Company" or "Co." may not be used in the name	ttion" or "incorporated	I" or the abbrevia	tion "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS		N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		NA	
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office:		enter the name o	of the
Name of New Registered Agent:	Н	A	
New Registered Office Address	Œ	lorīda street address)	
			orida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent: miliar with and accept	the obligations of	the position.
	A a	۲	
<u></u>	ignature of New Regist	ered Agent, if char	nging

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.

Type of Action (Check One)	Example: X_Change X_Remove X_Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Add		Title	<u>Name</u>	<u>Addres</u> s
2) Change	1) Change Add	<u></u>	A A	
Add	Remove		ı	
	2) Change Add		- A N	
4) Change	Remove 3) Change Add Remove		AA	
5)Change N A Remove 6)Change N A Add Remove E. If amending or adding additional Articles, enter change(s) here:			NIA	
Add Remove Change Add Remove Remove L. If amending or adding additional Articles, enter change(s) here:	Remove			
6)Change	5) Change Add		N A	
Add Remove E. If amending or adding additional Articles, enter change(s) here:	Remove			
E. If amending or adding additional Articles, enter change(s) here:			N/A	
	Remove			

	
	
	
10/8/22	
The date of each amendment(s) adoption: $10/8/2021$ date this document was signed.	_ if other than the
all 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 be document's effective date on the Department of State's records.	e 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

Signature Mula Celestar

(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)

MICHAEL UALCATING

(Typed or printed name of person signing)