## M17000001188

(Re	equestor's Name)	
(Ác	idress)	_
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bı	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	<del></del>

Office Use Only



700307338887

01/08/18--01004--024 \*\*35.00



Amund

JAN 1 0 2018 8 ALBRITTON

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Total Change Min	nistry, Inc	<del> </del>				_
DOCUMENT NUMBER:N17000007188				-		_
The enclosed Articles of Amendment and fee are su	abmitted for filing.					
Please return all correspondence concerning this ma	tter to the following:					
Valerie Johnson						
	(Name of Contact	Person)	<del>,</del>			-
Total Change Ministry, Inc						
	(Firm/ Compa	ıy)	<del></del>			-
3376 W Broward Blvd						
	(Address)		<del></del>	<del></del> ,	-	-
Fort Lauderdale, Florida 33312						
	(City/ State and Zip	Code)			- <del>-</del> -	-
Vdrummond861@gmail.com						
E-mail address: (to be use	ed for future annual re	port notilication	on)	· · · · · · · · · · · · · · · · · · ·		-
For further information concerning this matter, pleas	se call:					
Valerie Johnson	а	305 t	915-1752			
(Name of Contact Perso	on)	(Area Code)	(Daytime Telep	hone Numb	er)	•
Enclosed is a check for the following amount made p	payable to the Florida	Department of	State:			
*\$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		Certî is Certi (Add	50 Filing Fee ficate of Status fied Copy itional Copy is osed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	A D Cl	reet Address mendment Sec ivision of Corp ifton Building 61 Executive	orations		17 SEC 18	

Tallahassee, FL 32301



December 18, 2017

VALERIE JOHNSON TOTAL CHANGE MINISTRY, INC. 3376 W. BROWARD BLVD FORT LAUDERDALE, FL 33312

SUBJECT: TOTAL CHANGE MINISTRY, INC.

Ref. Number: N17000007188

We have received your document for TOTAL CHANGE MINISTRY, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 617A00025549

www.sunbiz.org

## Articles of Amendment to Articles of Incorporation of

Tota	l Change Ministry, Inc	:	
(Name of Corporation as cur	rently filed with the l	Florida Dept. of State)	<del></del>
	00007188	····	
(Document No	umber of Corporation (	if known)	
ursuant to the provisions of section 617,1006, Florida Stanendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not</i>	For Profit Corporation adopt	s the following
If amending name, enter the new name of the corpo	oration:		
			The new
me must be distinguishable and contain the word "corp Company" or "Co." may not be used in the name.	oration" or "incorpore	ated" or the abbreviation "Con	rp." or "Inc."
Enter new principal office address, if applicable:			
rincipal office address <u>MUST BE A STREET ADDRE.</u>	<u>SS</u> )		3
		<del></del>	
	<del></del>		مِن مَا اللهِ
Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )			
			. 3
	<del></del>		
	<del></del>		
If amending the registered agent and/or registered of	office address in Flori	da, enter the name of the	*
new registered agent and/or the new registered office	<u>ce address:</u>		
Name of New Registered Agent			
		(Florida street address)	
New Registered Office Address:			
	<del></del>	Florida (Zip Code,	
	(City)	(Zip Code,	)
w Registered Agent's Signature, if changing Register	ed Agent:		
ereby accept the appointment as registered agent. I am	familiar with and acce	ept the obligations of the positi	on.
	<u>-</u>		
	Signature of New Rey	tistered 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>V</u> <u>Mik</u>	Doe c Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Presiden	Dennis Boayke	2533 NW 99 Ave
Add			Coral Springs, Florida 33065
X Remove			
2) Change	Presiden	Valerie Johnson	2533 NW 99 Ave
X Add			Coral Springs, Florida 33065
Remove			
3) Change	Vice Pre	Valerie Johnson	2533 NW 99 Ave
Add			Coral Springs, Florida 33065
X Remove			
4) Change	Treasure	Charmaine Johnson	2533 NW 99 Ave
Add			Coral Springs, Florida 33065
X Remove			-
5) Change	Treasure	Richard Dean Charmaine Johnson	2533 NW 99 Ave
X Add			Coral Springs, Florida 33065
Remove			
6) Change	Officer D	Gregory Green	2533 NW 99 Ave
X Add	/		Coral Springs, Florida 33065
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	,			
Amending the name of Sheena Johnson to Sheena Klausch				
		•		
				<u> </u>
			· <u>-</u>	-
				. <del></del>
	•	•		
			<u> </u>	
	<del></del> .			
· · · · · · · · · · · · · · · · · · ·				

	December 7, 2017	
The date of each amendmen		_, if other than the
date this document was signed	l	
Effective data if applicables	December 7, 2017	
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 Department of State's records.	oc listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes cast for the amendment(s) pprovat.	
There are no members or adopted by the board of a	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	ember 7, 2017	
Dated		
Signature V	alvie Ahmon	
	e chairman or vice phairman of the board, president or other officer-if directors	_
	not been selected, by an incorporator – if in the hands of a receiver, trustee, or	
other	court appointed fiduciary by that fiduciary)	
Va	lerie Johnson	
	(Typed or printed name of person signing)	
Pre	esident	
	(Title of person signing)	