

10/28/22, 4:07 PM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : WILSON TAX & ACCOUNTING INC.
Account Number : I20150000107
Phone : (941)625-1925
Fax Number : (941)625-1526

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: wschmidt@livinglifeoutreach.org

COR AMND/RESTATE/CORRECT OR O/D RESIGN

LIVING LIFE OUTREACH, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment
to
Articles of Incorporation
of

LIVING LIFE OUTREACH, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N17000008614

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

IN HIS PRESENCE MINISTRIES, INC.

The new

name must be distinguishable and contain the word ☐ corporation ☐ or ☐ incorporated ☐ or the abbreviation ☐ Corp. ☐ or ☐ Inc. ☐
☐ Company ☐ or ☐ Co. ☐ may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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:

☒ Change PT John Doe
☒ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change ___ Add ___ Remove	VP/T	JACKQUELINE SCHMIDT	3706 WEST IDLEWILD AVE APT 601 TAMPA, FL 33614
2) ___ Change ___ Add ___ Remove	___	___	___
3) ___ Change ___ Add ___ Remove	___	___	___
4) ___ Change ___ Add ___ Remove	___	___	___
5) ___ Change ___ Add ___ Remove	___	___	___
6) ___ Change ___ Add ___ Remove	___	___	___

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FILED

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

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☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

10/28/2022 16:22 T-04:00 TO: +18506176380 FROM: 9416251526

- ☐ 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 OCTOBER 19, 2022

Signature

William W. Schmidt
(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)

WILLIAM SCHMIDT

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

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CLERK OF COURT
JANESVILLE, WI