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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Eagle Wings Ministries International INC
DOCUMENT NUMBER: N 17 00 00 10 4 9 5
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Florette Fenelon (Name of Contact Person)
Eagle Wings Ministries International INC
(Address)
Tamarac, FL 33319 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Florette Fenelon at 786 - 262 - 1067 (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 \$\sum \\$43.75 Filing Fee \& Certified Copy (Additional Copy is enclosed) \$35 Filing Fee \$\sum \\$\$43.75 Filing Fee \& Certified Copy (Additional Copy is Enclosed)
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 to Articles of Incorporation of

	VI	11. The Tolk
Eagle Wings Minist	tries International	INC =
(Name of Corporation as currently filed with the Florida	Dept. of State)	
N170000		
(Document Number	ber of Corporation (if known)	1, 1,
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopt	s the following
A. If amending name, enter the new name of the corpora	<u>ition:</u>	
name must be distinguishable and contain the word "corpora	-4:"	The new
"Company" or "Co." may not be used in the name.	mion or incorporated or the aboreviation Cor	p. or inc.
B. Enter new principal office address, if applicable:	6331 W Commercia	1 BNd
(Principal office address <u>MUST BE A STREET ADDRESS</u>	Tamarac, FL 333	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6331 W Commercial	Blud
	Tamarac, FL 33319	<i>i</i>
D. If amending the registered agent and/or registered off	ice address in Florida, enter the name of the	
new registered agent and/or the new registered office :	address:	
Name of New Registered Agent:		
633	31 W Commercial B1 (Florida street address)	lvd
New Registered Office Address:		
	/AMACAC Florida (Zip Code	33319
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		ion.

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: XChange X Remove X Add	PT <u>John D</u> V <u>Mike J</u> SV Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
I) Change Add	Chairman	Junior Pierre	6331 U Commercial Blvd Tamarac, F6 33319
Remove 2) Change Add	Pastor	Stanley Paulas	6331 W Commercial Blud Tamaray FL 33319
Remove 3) X Change Add Remove	Treasurer	Florette Fenelon	6331 V Commercial Blvd Tamarac, FZ 33319
4) Change Add	Secretary	Shantel Huzuri - Freeman	6331 U Commercial Blvc Tumarac FL 33319
Remove 5) Change Add	_5_	Widny ST. Julien	7810 N.W. 44th Street Sunnse, FL 33351
Remove 6) Change Add			
	adding additional Art I sheets, if necessary).	icles, enter change(s) here: (Be specific)	

		10.00
		
		
		
		
		
The date of each amendment(s) adoption date this document was signed.	n:	, if other than the
Effective date if applicable.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	es not meet the applicable statutory filing requirements, this date will not be	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

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 $\frac{6/09/2022}{200000000000000000000000000000000$
Signature Signature Jacobson
(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)
Shantel Hazuri - Freeman
(Typed or printed name of person signing)
Secretary
(Tiple of person signing)