N17000011348

	_
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(Business Entity Name)	_
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TO: Amendment Section Division of Corporations				
	Maxwell Worldwide	Ministries Inc.		
NAME OF CORPORATION	N:		<u> </u>	
	17000011348			
The enclosed Articles of Amer	ndment and fee are subm	nitted for filing.		
Please return all corresponden	ce concerning this matter	r to the following:		
Dennis Maxwell				
	<u> </u>	(Name of Contact F	Person)	,
Maxwell Worldwide Ministrie	:s Inc.			
		(Firm/ Compar	ıy)	· · · · · · · · · · · · · · · · · · ·
150 BERGEN CIRCLE				
	······································	(Address)		
AUBURNDALE, FL 33823				
	((City/ State and Zip	Code)	
info@ministrylaunchnow.com	1			
E-n	nail address: (to be used	for future annual re	port notification)
For further information concer	ning this matter, please c	call:		
Angela Mooney		а	713 1	302-1878
1)	ame of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the fol	lowing amount made pay	able to the Florida	Department of S	State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & I Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certifi is Certifi) Filing Fec cate of Status ed Copy ional Copy is sed)
Mailing Ad Amendment Division of P.O. Box 63 Tallahassee,	Section Corporations 27	A D C 20	treet Address mendment Section ivision of Corpo lifton Building 661 Executive Co allahassee, FL 32	rations enter Circle

	Artic	es of Amendment		MILLING CONTRACTOR
	Article	to is of Incorporation		TOS BY
• • • • •		of		1 8 Ag
MaxWell	Worldwide	Ministries	Inc.	a contraction of the second
(<u>Na</u>	ume of Corporation as curre	ntly filed with the Flori	da Dept. of State)	
N17000011348				1. C.
<u></u>	(Document Num)	ber of Corporation (if kn	iown)	C. C. C
Pursuant to the provisions of se amendment(s) to its Articles of		cs, this Florida Not For	Profit Corporation a	dopts the following
A. If amending name, enter t	he new name of the corporat	tion:		
N/A				The new
name must be distinguishable a		ition" or "incorporated	" or the abbreviation	
<u>"Company" or "Co." may not</u>	<u>be used in the name</u> .			
B. Enter new principal office	address, if applicable:			
(Principal office address <u>MUS</u>	<u>T BE A STREET ADDRESS</u>) 150 BERGEN CIRCI	E	
		AUBURNDALE, FL	33823	······································
C. Enter new mailing addres		150 BERGEN CIRCE	Ŧ	
(Mailing address <u>MAY BE</u>	<u>A POST OFFICE BOX</u>)		22022	
		AUBURNDALE, FL	33823	
D. If amending the registered			enter the name of the	<u>e</u>
new registered agent and/	or the new registered office a			
<u>Name of New</u>	Registered Agent: NA			
	150 BER	GEN CIRCLE		
		(Flo	orida street address)	· <u>····</u>
<u>New Registe</u>	ered Office Address:	NIDALE:		77010
	AUBUR		, Florida	33823
		(Citv)	(Zip (Code)
New Registered Agent's Signa	ature, if changing Registered	Agent:		

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

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N/A Signature of New Registered Agent, if changing

Page 1 of 4

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)

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Please note the officer/director title by the first letter of the office title:

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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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	PTJohn DoeVMike JonesSVSally Smith	
Type of Action (Check One)	<u>Title</u> Name	<u>Addres</u> s
I) Change		
Add	h.	
2) Change	(K	
2) Add	NK	
Remove		<u></u>
3) Change		
Remove		
4) Change		
Add	NA	
Remove		
5) Change		
Add Remove	V	
6) Change		
Add	NA	
Remove	Page 2 of 4	

Ε.	lf	amen	ding	or adding	<u>additional</u>	Articles,	enter ch	ange(s) here:

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(attach additional sheets, if necessary). (Be specific)

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> ------____ _ _____ -----..... ____ ____ _ _____ ____ -...... ____ _ ----..... ____ _... ·----____

> > Page 3 of 4

The	date of each ame	idment(s) adoption:	11/14/17	, if other than the
	this document was	signed.		
		11/14/17		
Effe	ctive date <u>if appli</u>	cable: (no	more than 90 days after amendment file date)	
		1		
		ed in this block does no ate on the Department o	ot meet the applicable statutory filing requirements, this date will not b of State's records.	e listed as the
Ado	option of Amendm	ent(s) (<u>C</u>	HECK ONE)	
	The amendment(s was/were sufficient		the members and the number of votes cast for the amendment(s)	
	There are no men adopted by the bo		ed to vote on the amendment(s). The amendment(s) was/were	
	Dated	11/14/17		
	Signature			_
		have not been selected	ce chairman of the board, president or other officer-if directors 1, by an incorporator – if in the hands of a receiver, trustee, or fiduciary by that fiduciary)	
		Dennis Maxwell		
			(Typed or printed name of person signing)	
		President		
			(Title of person signing)	

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