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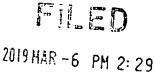
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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	Yeshua House of Isra	ael			
•	N18000001054	_			
DOCUMENT NUMBER:			· · · · ·		_
The enclosed Articles of Am	endment and fee are sub	nitted for filing.			
Please return all corresponde	ence concerning this matte	er to the following:			
Lavaughn Lewis					
		(Name of Contact Pe	rson)		
		(Firm/ Company	·)		
1545 NW 7th Terrace					
		(Address)	<u> </u>		
Pompano Beach, Florida 33	060				
	1 1 - ·	(City/ State and Zip 6	Code)		_
pastorlavaughn@gmail.com					
E	-mail address: (to be used	for future annual rep	ort notification	1)	
For further information conc	erning this matter, please	call:			
Pastor Lewis		at	954	553-0441	
	(Name of Contact Person			(Daytime Telephone Number)	_
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida I	Department of 3	State:	
☐ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certif 8 Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing A	ddress	Str	reet Address		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



YESHUA HOUSE OF ISRAEL, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N18000001054 (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: YAHUSHA HOUSE OF YISRAEL, INC. 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: . Florida (Citv) (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: X Change X Remove X Add	PT John De V Mike Jo SV Sally Si	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artication (attach additional sheets, if necessary).	(Be specific)
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*** ***	

ľhe	e date of each amendment(s) ado	ption:	, if other than the
late	this document was signed.		
Eff	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
	te: If the date inserted in this block ument's effective date on the Depa	c does not meet the applicable statutory filing requirements, this date will no artment of State's records.	ot be listed as the
Ade	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)	
	There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/were s.	
	Dated MARCH 1, 2	019	
	Signature (By the oblige	an 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 pointed fiduciary by that fiduciary)	
	LAVAUG	HN LEWIS	
		(Typed or printed name of person signing)	
	PRESIDE	NT/DIRECTOR	
		(Title of person signing)	