

N 18 00000 3088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

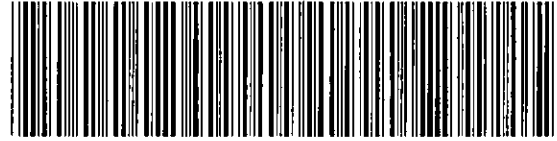
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Profit - Nonprofit

Office Use Only



500435861685

09/03/24--01034--025 **35.00

2024 NOV 4 PM 3:53
RECEIVED

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: POW MINISTRIES

DOCUMENT NUMBER: N18000003088

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

James F McCormick III

(Name of Contact Person)

POW Ministries, Inc.

(Firm/ Company)

1312 Scott Circle

(Address)

Lakeland/Florida/33805

(City/ State and Zip Code)

webbadohyeah@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James F McCormick III

863

327-3402

at

(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

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed)

(Fee was paid 8/29/24
check #101)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

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

POW MINISTRIES, INC

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

N18000003088

(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:

N/A

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:

N/A

*(Principal office address **MUST BE A STREET ADDRESS**)*

N/A

N/A

C. Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

N/A

N/A

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:

N/A

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

N/A

(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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>N/A</u> Change	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u> Add			<u>N/A</u>
<u>N/A</u> Remove			<u>N/A</u>
2) <u>N/A</u> Change	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u> Add			<u>N/A</u>
<u>N/A</u> Remove			<u>N/A</u>
3) <u>N/A</u> Change	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u> Add			<u>N/A</u>
<u>N/A</u> Remove			<u>N/A</u>
4) <u>N/A</u> Change	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u> Add			<u>N/A</u>
<u>N/A</u> Remove			<u>N/A</u>
5) <u>N/A</u> Change	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u> Add			<u>N/A</u>
<u>N/A</u> Remove			<u>N/A</u>
6) <u>N/A</u> Change	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>N/A</u> Add			<u>N/A</u>
<u>N/A</u> Remove			<u>N/A</u>

E. If amending or adding additional Articles, enter change(s) here:

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

Amending Article VII The Changes Are As Follows:

Article VII

In the event of dissolution, the residual assets of the organization will be turned over to one or more

organizations which themselves are exempt as organizations described in section 501(c)(3) and 170(c)(2) of the

Internal Revenue Code of 1954 or corresponding sections of any prior or future law, or to the Federal, State,

or Local Government for exclusive public purpose.

Adding Article VIII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P JAMES F MCCORMICK III. 1312 SCOTT CIRCLE LAKELAND, FL. 33805 US

Title: VP VIOLET C MCCORMICK 1312 SCOTT CIRCLE LAKELAND, FL. 33805 US

Title: D VONIELLE R NORTHERN 5919 NELL LANE ELLENWOOD, GA. 30294 US

The date of each amendment(s) adoption: N/A, if other than the date this document was signed.

Effective date if applicable: (no more than 90 days after amendment file date)
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

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

- ☒ 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 August 30, 2024

Signature James F. McCormick III
(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)

James F. McCormick III
(Typed or printed name of person signing)

President
(Title of person signing)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 11, 2024

JAMES F MCCORMICK III
1312 SCOTT CIRCLE
LAKE LAND, FL 33805

SUBJECT: POW MINISTRIES, INC.
Ref. Number: N18000003088

We have received your document for POW MINISTRIES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA NOT FOR PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Anissa Butler
Regulatory Specialist II

Letter Number: 824A00020300