N1800000 3157

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: FOR EVER LASTING REVELATION IN
DOCUMENT NUMBER: N1800003157
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Margaret McDowell (Name of Contact Person)
For EverLasting Revelation Inc.
6001 NW 8th Avenue
Miami, FL 33127 (City/ State and Zip Code)
tore ver lasting revelation a mail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Margaret Model at 305 3 16 4 220 (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 & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)

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

For Everlasting Key	elation Inc.	
(Name of Corporation as currently filed with the Florida D (Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit Corporatio</i>	n adopts the following
name must be distinguishable and contain the word "corporatie "Company" or "Co." may not be used in the name.	Nomen Inc.	The new
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	2020 JUL 22
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA	22 AH 11: 22
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad Name of New Registered Agent:		the
New Registered Office Address:	(Florida street address)	
New Registered Agent's Signature, if changing Registered A language languag	Agent:	ip Code)
Sig	nature of New Registered Agent, if chang	ing

f amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, nar	ne,
nd 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 Doc 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 Doc, 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 Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add		N/A	
Remove		,	
2) Change Add		NA	
Remove 3) Remove Add Remove		NA	
4) Change Add		N A	
Remove			
5) Change Add		N/A	
Remove		,	
6) Change Add		N/A	
Remove		-	
E. If amending or addin (attach additional sheet	ts, if necessary).	cles, enter change(s) here: (Be specific)	
	<u> - - - - - - - - - - - - - </u>		
-			
			

N/A
The date of each amendment(s) adoption:
date this document was signed. Effective date if applicable: (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 east for the amendment(s) was/were sufficient for approval.

e no members or members entitled to vote on the amendment(s). The amendment(s) was/were by the board of directors.
Dated 7/17/2020
Signature My My Chairman of the board, president or other officer-if directors
have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Margaret McDowell
(Typed or printed name of person signing)
President (Title of person signing)

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