

N18000000 7498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

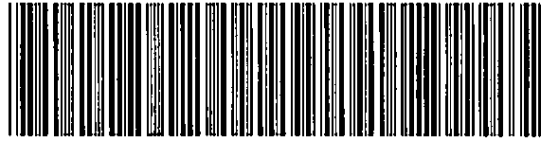
(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
20 MAY 21 PM 2:08

*Amend*

JUN 02 2020

D CUSHING

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Timothy Initiative Ministries Inc.

DOCUMENT NUMBER: N18000007498

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

Please return all correspondence concerning this matter to the following:

Christian Lang

(Name of Contact Person)

Timothy Initiative Ministries Inc.

(Firm/ Company)

Po Box 280002

(Address)

Tampa FL 33682

(City/ State and Zip Code)

Christian @ Timothyinitiative.org

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

For further information concerning this matter, please call:

Christian Lang

(Name of Contact Person)

at (813) 843-0835

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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

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DIVISION OF CORPORATIONS  
20 MAY 21 PM 2:08

2020



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 12, 2020

CHRISTIAN LANG  
PO BOX 280002  
TAMPA, FL 33682

SUBJECT: TIMOTHY INITIATIVE MINISTRIES INC.  
Ref. Number: N18000007498

We have received your document for TIMOTHY INITIATIVE 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 Corporatio, but your entity is a Florida Non-Profit Corporation. Please complete and return the enclosed blank form(s).

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.

Diane Cushing  
Senior Section Administrator

Letter Number: 520A00009691

Articles of Amendment  
to  
Articles of Incorporation  
of

Timothy Initiative Ministries Inc.

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

N18000007498

(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:

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:

(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:

New Registered Office Address:

(Florida street address)

(City)

Florida

(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

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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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> 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) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>P</u>	<u>Kimbrough, Kevin</u>	<u>905 E 22nd Ave</u> <u>Tampa, FL 33605</u>
2) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>T</u>	<u>MacKinnon, Alex</u>	<u>4911 W Spring Lake DR.</u> <u>Tampa, FL 33629</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>      </u>	<u>      </u>	<u>      </u> <u>      </u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>O</u>	<u>Lohden, Christopher</u>	<u>14816 Carnation DR</u> <u>Tampa, FL 33613</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>O</u>	<u>Glass, Guy</u>	<u>911 E. McBerry St</u> <u>Tampa FL 33603</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>      </u>	<u>      </u>	<u>      </u> <u>      </u>

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

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

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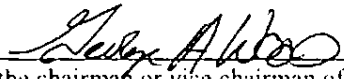
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☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ 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 4/1/2020

Signature   
(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)

George Wood  
(Typed or printed name of person signing)

CEO  
(Title of person signing)