NBOOD 1537

| (Re | equestor's Name) | | | |
|---|--------------------|-------------|--|--|
| (Ac | ldress) | | | |
| (Ac | ldress) | | | |
| (Ci | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bi | isiness Entity Nan | ne) | | |
| | | | | |
| (Do | cument Number) | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



200318400342

09/19/18--01808--009 **85.00

TILILU

18 SEP 19 AH 8: 07

ALLAHASSEE FLORIDA

SEP 20 2018 S. YOUNG

COVER LETTER

TO: Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

7

NAME OF CORPORATION: CHRIST MIRACLE CHURCH MISSION INC WORLDWIDE, LAGOS NIGERIA N18000007537 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ABIDEMI ADETUTY
(Name of Contact Person) (Firm/ Company) 3511 LOGGERHEAD WAY WESLEY CHAPEL FL 33544

(Address)

WESLEY CHAPEL FL 33544

(City/ State and Zip Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: BIDEMI ADETUTY at 813 506 0691

(Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee ☐ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

| CHRIST MIRACLE CHURCH | MISSION INC WORLDWIDE LAGOS NO |
|---|--|
| | ently filed with the Florida Dept. of State) |
| N18000007 | 537 |
| (Document Num | nber of Corporation (if known) |
| Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation: | ates, this Florida Not For Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corpora | ation: |
| CHRIST MIRACLE CHURCH M | 15510 N WOLLDWIDE LAGUS NIGERIA-INC The new region" or "incorporated" or the abbreviation "Corn" or "Inc." |
| name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name. | and in incorporated of the above viation cosp. or me. |
| B. Enter new principal office address, if applicable: | 3511 LOGGERHEAD WAY |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> | 3511 LOGGERHEAD WAY SI WESLEY CHAPEL IL 33544 |
| | |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 3511 LOGGERHEAD WAY |
| | WESLEY CHAPEL FL 33544 |
| | |
| | D : 00 |
| D. If amending the registered agent and/or registered off new registered agent and/or the new registered office | |
| Name of New Registered Agent: | N/A SS E |
| | N/1 5 2 D |
| | (Florida street address) |
| New Registered Office Address: | 07 |
| | (City), Florida (Zip Code) |
| N. B. La January Charles W. N. Jan B. Car | |
| New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f | |
| | . 1 1 4. |
| | Signature of New Registered Agent, if changing |
| | Signature of New Negisterea 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 | <u>V</u> <u>Mil</u> | n Doe ke Jones ly Smith | | |
|----------------------------------|---------------------|-------------------------------|---------|---|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | | <u>Addres</u> s |
| 1) Change Add | | | 11/4 | |
| Remove | | | | - · · · · · · · · · · · · · · · · · · · |
| 2) Change Add | | | i /r, | |
| Remove | | | N/h- | |
| 3) Change Add | | | | |
| Remove | | | | |
| 4) Change Add | | | N. / A | |
| Remove | | | | |
| 5) Change | | / | V (10- | |
| Add Remove | | | | |
| 6) Change | | | N/4 | |
| Add | | | | |
| Remove | | | | |

| ttach additional sheets, if necessary). | (Be specific) |
|---|---------------------------------------|
| | j. |
| | No. 1 is |
| | ' |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | · · · · · · · · · · · · · · · · · · · |
| | |
| | |
| | |
| | |
| | |
| | |
| | <u></u> |
| | |
| | |
| | |
| | |
| | |
| | |

| The | e date of each amendment(s) adoption: | _, if other than th |
|------|--|---------------------|
| date | e this document was signed. | |
| Effe | fective date if applicable: (no more than 90 days after amendment file date) | |
| | (no more than 90 days after amendment file date) | |
| | te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not cument's effective date on the Department of State's records. | pe listed as the |
| Ade | option 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. | |
| Æ | 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 08/15/2019 Signature AAAA-Coth | |
| | Signature SAACOULT | _ |
| | (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) | |
| | ABIDEMI ADETUTY | |
| | (Typed or printed name of person signing) | |
| | REPRESENTATIVE (Title of person signing) | |
| | (Title of person signing) | |