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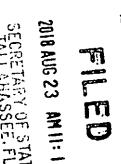


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And R. WHITE

AUG 2 4 2018



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Holy Ghost Training Center Church (
DOCUMENT NUMBER: N 1800000 8651
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Heather Wimberly (Name of Contact Herson)
(Firm/ Company)
938 N.W. 4) terr (Address)
(Address)
Miami, Florida 33127 (City/ State and Zip Code)
(City/ State and Zip Code)
Pastor Culmer D gmail . Com E-mail address: (to be used for future abundal report notification)
E-mail address: (to be used for future abundal/report notification)
For further information concerning this matter, please call:
Alline B. Colmer at 305-751-3498 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(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
Mailing Address Street Address

Mailing Address

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

A	Articles of Incorporation	V Care Care
1121. Ch~1T	or Coolac	C . ~ 2018 AUG 23 AM 11:
HOLUSTOST IF	currently filed with the Floris	to Dent of State Transaction
(Mane of Corporation as o	urrentis med with the Florid	ta Dept. of States ECRETARY OF STATE TALLAHASSEE, F.
	Number of Corporation (if kno	
rsuant to the provisions of section 617.1006, Florida endment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	Profit Corporation adopts the following
If amending name, enter the new name of the cor	rporation:	
		The new
me must be distinguishable and contain the word "co company" or "Co," may not be used in the name.	orporation" or "incorporated"	or the abbreviation "Corp." or "Inc."
Enter new principal office address, if applicable:		
rincipal office address <u>MUST BE A STREET ADD</u>	RESS)	
	$\overline{}$	
	\	
Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	9	-
		— <i> </i>
Te II al ta la	a .eea :	
If amending the registered agent and/or registered new registered agent and/or the new registered of		ntersthe name of the
		,
Name of New Registered Agent:		
	A2	ida street address)
New Registered Office Address:	(1)	iaa sireer aaarws)
		, Florida
	(City)	(Zip Code)
	-	- ,
w Registered Agent's Signature, if changing Regi- ereby accept the appointment as registered agent. I		he ablivations of the position
о егу, иссертте арронитет со теденетей адет. Т	am jammar man unu uccept tr	to ovinguitoria of the position.
	Signature of New Register	red 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 E V Mike J SV Sally S	<u>Iones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	P Chan Presid	Alline B. Culmer age from Poistor to ent	938 N.W. 47 ter Miami, FC 33127
2) Change Add Remove 3) Change Add Remove			
4) Add Remove	——————————————————————————————————————	From Chaplin to	4341 NW 207 Drive Micimi, FC 33055
5) Change Add Remove	S Change Secreto	Linda Hibbert e from assistant to	1481 NG 1 52 5+ Miami, FC 33169
6) Change Add Remove	<u>S</u> Lemoi	Zipha Goins ve Page 2 of 4	2270 N.W. 1915+ Miami, FC 33/69

	r than the
Effective date if applicable: 8/21/8 (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 a document's effective date on the Department of State's records.	s the
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 8/21/18	
Signature alline B. Culmer	
(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)	
Alline B. Culmer (Typed or printed name of person signing)	
President (Title of person signing)	