N180000 10775

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2021 OCT -4 PM 1: 30 SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	INC		
N18000010775 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submit	tted for filing.		
Please return all correspondence concerning this matter	to the following:		
AISHA TOWLES			
4)	Varne of Contact Pe	rson)	
GIFT;D MINITRIES INC			
	(Firm/ Company)	
PO BOX 612			
	(Address)		
TARPON SPRINGS FL 34688			
(C	ity/ State and Zip (Code)	
AISHA.TOWLES22@GMAIL.COM			
E-mail address: (to be used to	r future annual rep	ort notification	n)
For further information concerning this matter, please cal	II:		
WILLIM M PULLER	21	727	365 3324
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made payat	ble to the Florida I)	epartment of S	State:
,	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section Division of Corporations	Λme	et Address endment Sections of Compa	

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

FILED

2021 OCT -4 PM 1: 30 (Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE
TALLAHASSES, SI N18000010775 (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: 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: (Florida street address) New Registered Office Address:

New Registered Agent's Signature, if changing Registered Agent:

GIFT'D MINISTRIES INC

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional sheet	g addition s, if neces	nal Articles, enter change(s) here: (sary). (Be specific)	
1. Designate the previous	unnumbe	red Amendment as; ARTICLE IX	
2. Amend ARTICLE III s	econd par	agraph as follows:	
Further, the Organization	on is organ	nized exclusively for Charitable, Religious, Educa	tional and Scientific
purposes under 501 c 3	of the Int	ernal Revenue Code or any corresponding setion of	f any future Federal Tax Code.

Upon the dissolution of this Organization, Assets shall be distributed for one or more exempt purpose	s within the meaning
of Section 501 c 3 of the Internal Revenue Code or corresponding section of future federal tax code,	
to the Federal Government or to the State or Local Government for a Public Purpose.	
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The date of each amendment(s) adoption: S 12 202	, if other than the
Effective date if applicable: \[\lambda \left[12 \right] 202 \right]	

<u>Note:</u> 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.

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 10/1/2021
Signature 115. Austra 114
(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)
Ms. Qisha M Towles (Typed or printed name of person signing)
President
(Title of person signing)