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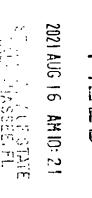
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: SINGING PASTO	RS INC	
DOCUMENT NUM	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	DWIGHT MOMENT		
	SINGING PASTORS	Name of Contact Person	1
		Firm/ Company	
	675 NW 22ND ROAD		
	FORT LAUDERDALE FI	Address ORIDA 33311	
		City/ State and Zip Cod	e
	INFO@SINGINGPASTORS	S.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatic	on concerning this matter, pleas	se call:	
LEOLA WITHERSP	OON	at ( <u>954</u>	274-1053
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Dep:	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 Y	Address Iment Section in of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

SINGING PASTORS INC.					_
(Name	of Corporation as currentl	y filed with the Florida Dept. of Sta	te)	_	
N19000001346					
	(Document Number o	f Corporation (if known)			
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the	e followii	ig amei	idment(s) to
A. If amending name, enter the new n	ame of the corporation:				
				The	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association."	Corp, " "Inc," or "Co" 2	company," or "incorporated" or the a professional corporation name mu	hbreviati ist conta	on "Co. in the s	rp.," word
B. Enter new principal office address,	if applicable:			<u>-</u>	— ,::a
(Principal office address MUST BE A S	TREET ADDRESS )		-	202	6.3
				35-	_ 
				<u> </u>	
C. Enter new mailing address, if appl	icable <u>:</u>	675 NW 22ND ROAD		5	
(Mailing address MAY BE A POST	<u>OFFICE BOX</u> )		171777	_ <del></del>	<u>—</u> III
		FORT LAUDERDALE FL 33311	<u> </u>	횽_	
			7	<u>ှာ</u>	
			• •		
D. If amending the registered agent at new registered agent and/or the ne	nd/or registered office add	<u>ess in Florida, enter the name of th</u>	<u>e</u>		
new registered agent and/or the ne	WITHERSPOON ENTER				
Name of New Registered Agent	WITHERST COON ENTERTRISE LEX				
	4100 S HOSPITAL DRIVI			_	
	(Florida str	vet address)			
New Registered Office Address:	PLANTATION	Florida	.33311 1 <u>.                                  </u>		
		(City)	(Zip	Code)	
	no contra de la contra del la contra del la contra del la contra de la contra del la contra de la contra de la contra del la contra de				
<u>New Registered Agent's Signature, if c</u> I hereby accept the appointment as regist	nanging Registered Agent tered agent. Lam familiar v	: vith and accept the obligations of the p	position.		
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		//			
	y-1/1/1/1/			_	
	Signature of New Ro	egistered Agent, if changing			

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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.

X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	TRE	DWAYNE MOMENT	3511 NW 35TH STREET
Add			LAUDERDALE LAKES
X Remove			FLORIDA 33311
Kemove	TRE	YOLANDA WALKER	4920 NW 12TH STREET
X Add			LAUDERHILL FL 33313
Remove 3 ) Change	SEC	XAVIAS BOYD	1705 NW 3RD COURT
X Add			FORT LAUDERDALE FL 33311
Remove	D	SHANTERIA KENDRICK	418 LOCK ROAD
4) Change	<del></del>	SHANTERIA KENDATOK	
X Add			DEERFIELD BCH FL 33442
Remove			
5) Change	<u> </u>		_
Add			
Remove			
6) Change		<u> </u>	_
Add			
Remove			

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a amandment provide	s for an exchange, reclassif	ication, or cancellation	of issued shares.	
ramendine ne provide.	ting the amendment if not o	contained in the amend	ment itself:	
svisions for implement	icate N/A)			
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	08/11/2021	if other than the
The date of each amendment(s) adoption: date this document was signed.		if other than the
08/11/2021		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del></del>
<b>Note:</b> If the date inserted in this block does document's effective date on the Department	s not meet the applicable statutory filing requirements, this date will a tof State's records.	not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by t action was not required.	the incorporators, or board of directors without shareholder action and s	thareholder
☐ The amendment(s) was/were adopted by t by the shareholders was/were sufficient for	the shareholders. The number of votes cast for the amendment(s) for approval.	
☐ The amendment(s) was/were approved by must be separately provided for each voti	the shareholders through voting groups. The following statement ing group entitled to vote separately on the amendment(s):	
"The number of votes cast for the ar	mendment(s) was/were sufficient for approval	
by	<u> </u>	
()	voting group)	
selected by an in	esident or other officer it directors or officers have not been neorporator – if in the hands of a receiver, trustee, or other court iary by that fiduciary)	_
7	Durant Moment	
	(Typed dr printed name of person signing)	
	President	<u></u>
\ \	(1 file at person signified)	