N19 000000 2832

(Re	equestor's Name)		
(Ad	Idress)	3333.	
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(Cit	ty/State/Zip/Phone	e #)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	God Reigns Ministric	es Inc		i, ¢
DOCUMENT NUMBER:	N19000002832			
The enclosed Articles of Am	endment and fee are subn	nitted for filing.		
Please return all corresponde	ence concerning this matter	r to the following:		
Alandus Sims				
		(Name of Contact	Person)	<u> </u>
God Reigns Ministries				
		(Firm/ Compa	any)	
P.O Box 784596		(· · · · · · · · · · · · · · · · · · ·		
F.O Box 784396				
		(Address)		
Winter Garden FL 34778				
	•	(City/ State and Zi	ip Code)	
adsimsministries@gmail.co	m			
E	-mail address: (to be used	for future annual	report notification	n)
For further information conc	erning this matter, please o	call:		
Alandus Sims			407 at	
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florid	a Department of	State:
☐ \$35 Filing Fee	■\$43.75 Filing Fee & [Certificate of Status	□S43.75 Filing For Certified Copy (Additional copenclosed)	Certit y is Certit	0 Filing Fee ficate of Status fied Copy tional Copy is osed)
P.O. Box 6	nt Section t'Corporations	!	Street Address Amendment Sect Division of Corpo Clifton Building 2661 Executive C	orations

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

God Reigns Ministries Inc

(Name of Corporation	as current	ly filed with the Florida Dept. of S	State)	
N19000002832				
(Docur	nent Numbe	r of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes	s, this <i>Florida Not For Profit Corpo</i>	oration adopts the fo	ollowing
A. If amending name, enter the new name of the	e corporatio	on:		
God Reigns Church Inc				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		on" or "incorporated" or the abbr		
B. Enter new principal office address, if applicable:		955 E Story Rd		
(Principal office address <u>MUST BE A STREET</u> A		Winter Garden FL		
		34787		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PO Box 784596	:	2019 007
		Winter Garden FL 34778		
				ممين ا ب
D. If amending the registered agent and/or reging new registered agent and/or the new register			ne of the	= :: ::
	N/A			Ω
Name of New Registered Agent:	N/A			
New Registered Office Address:		(Florida street addr	ess)	
	N/A		Marida	
		(City)	_, Florida (Zip Code)	
New Registered Agent's Signature, if changing 1	Damintanad	A gant.		
I hereby accept the appointment as registered ager			is of the position.	
_				
	Siş	gnature of New Registered 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>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	nes	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				7
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

. If amending or adding additional Art (attach additional sheets, if necessary).	• •
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	October 1, 2019	
The date of each amendment	(s) adoption:	, if other than the
date this document was signed		
	October 1, 2019	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	I not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) oproval.	
There are no members or adopted by the board of c	members entitled to vote on the amendment(s). The amendment(s) was/were firectors.	
Octob Dated	per 1,2 019	
Signature	flands I frais	
	chairman or vice chairman of the board, president or other officer-if directors	
	not been selected, by an incorporator – if in the hands of a receiver, trustee, or	
other o	court appointed fiduciary by that fiduciary)	
Ala	andus Sims	
_	(Typed or printed name of person signing)	
Pro	esident CEO	
_	(Title of person signing)	