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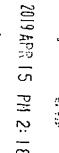
Office Use Only

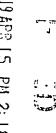


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R. WHITE APR 19 2013





April 4, 2019

Florida Department of State 2661 Executive Center Circle Tallahassee, FL 32101

REF: ARTICLES OF INCORPORATION AMENDMENT

To Whom It May Concern:

Attached is the application to amend the Articles of Incorporation for Heart for Zion Missions, Inc. I've attached a cashier check in the amount of \$43.75 to cover the charge of the amendment.

Should you have any questions, feel free to contact me at 863-206-2269. My mailing address is 2214 Port NW, Winter Haven, FL 33881.

Thank you

Brenda Cofer

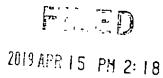
COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Heart for Zion Missi | ons, Inc |
|--|---|
| N19000003473 DOCUMENT NUMBER: | |
| | |
| The enclosed Articles of Amendment and fee are subr | mitted for filing. |
| Please return all correspondence concerning this matte | er to the following: |
| Bren | da Cofer |
| | (Name of Contact Person) |
| | N/A |
| | (Firm/ Company) |
| 221 | 4 Port NW |
| | (Address) |
| Win | ter Haven, FL 33881 |
| | (City/ State and Zip Code) |
| bd | cofer@msn.com |
| E-mail address: (to be used | for future annual report notification) |
| For further information concerning this matter, please of | call: |
| Brenda Cofer | 863 206-2269 at |
| (Name of Contact Person) | |
| Enclosed is a check for the following amount made pay | vable to the Florida Department of State: |
| ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) |
| Mailing Address Amendment Section | Street Address Amendment Section |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



| Heart | for Zion Missions, Ir | c |
|---|-------------------------------|---|
| (Name of Corporation as curr | ently filed with the F | lorida Dept. of State) - 32. |
| N | 19000003473 | ACC CONTRACTOR |
| (Document Nur | nber of Corporation (| f known) |
| Pursuant to the provisions of section 617.1006. Florida Statiamendment(s) to its Articles of Incorporation: | utes, this <i>Florida Not</i> | For Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corpor | ation: | |
| N/A | | The new |
| name must be distinguishable and contain the word "corportion of the word "corportion of the used in the name." | ration" or "incorpora | sted" or the abbreviation "Corp." or "Inc." |
| B. Enter new principal office address, if applicable: | N/A | |
| (Principal office address <u>MUST BE A STREET ADDRES.</u> | <u>S</u>) | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N/A | |
| | | |
| | | |
| | • | |
| D. If amending the registered agent and/or registered of | | la, 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: | | 12 107 aar 30 CC paar (317 |
| | | Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registere | d Agent: | |
| I hereby accept the appointment as registered agent. I am j | familiar with and acce | pt the obligations of the position. |
| | | |

Signature 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: \underline{X} Change \underline{X} Remove \underline{X} Add | <u>V</u> <u>M</u> | ohn Doe like Jones ally Smith | |
|--|-------------------|-------------------------------------|-----------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | . <u>Addres</u> s |
| 1) Change | D | Angie Thibodaux | 1291 Devin Oaks Court |
| X Add | | | Lakeland, FL 33811 |
| Remove | | | |
| 2) Change | | N/A | |
| Add | | | |
| Remove | | | |
| 3) Change | | N/A | |
| Add | | | |
| Remove | | | |
| 4) Change | | N/A | |
| Add | | | |
| Remove | | | |
| 5) Change | | N/A | |
| Add | | | |
| Remove | | | |
| б) Change | | N/A | |
| Add | | | |
| Remove | | | |

| (attach additional sheets, if necessary). (Be specific) |
|---|
| A. Said organization is organized exclusively for chairitable, religious, educational, and scientific purposes, including |
| for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501 (c) (3 |
| of the Internal Revenue Code or corresponding section of any future federal tax code. |
| B. Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning |
| of Section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be |
| distributed to the federal government or to a state or local government for a public purpose. Any such assets not disposed |
| of by a Court of Competent Jurisdiction of the county in which the principal office of the organization is then located |
| exclusively for such purposes or to such organization or organizations, as said Court shall determine which are organized |
| and operated exclusively for such purposes. |
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|------------|---|---|---|------------------------|
| Γh | e date of each amendment(s) ado | tion: | | , if other than the |
| late | e this document was signed. | | | the officer trians the |
| | | 4-4-19 | | |
| Eff | ective date <u>if applicable</u> : | | | |
| | | (no more than 90 days after amend | lment file date) | |
| Not loc | te: If the date inserted in this block ument's effective date on the Depa | does not meet the applicable statutory tment of State's records. | filing requirements, this date will not | be listed as the |
| ٩d٥ | option of Amendment(s) | (<u>CHECK ONE</u>) | | |
| | The amendment(s) was/were adop was/were sufficient for approval. | ted by the members and the number of | votes cast for the amendment(s) | |
| | There are no members or member adopted by the board of directors | s entitled to vote on the amendment(s). | The amendment(s) was/were | |
| | Dated | 4-4-19 | | |
| | Signature <u>Bren</u> | la Coter | | _ |
| | have not been: | n or vice chairman of the board, presid elected, by an incorporator – if in the b ointed fiduciary by that fiduciary) | ent or other officer-if directors nands of a receiver, trustee, or | |
| | | Brenda Cofer | | |
| | | (Typed or printed name of | person signing) | |
| | | President/Founder | | |
| | <u>-</u> | (Title of person | signing) | |