N19000004395

300329399903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _______ Certificates of Status _______

Special Instructions to Filing Officer:

Office Use Only

05/22/19--01010--017 **35.00

2019 MAY 22 PM 3:12

FILED

C. GOLDEN

JUN 10 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Salvation By Grace Ministry, Inc.

DOCUMENT NUMBER: N19000004395

The enclosed ***Articles of Amendment*** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lifranc Julmiste
(Name of Contact Person)

Salvation By Grace Miistry, Inc.
(Firm/ Company)

2212 SW Cameo Blvd
(Address)

Port St Lucie, Florida 34953
(City/ State and Zip Code)

lj.jncharle@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lifranc Julmiste at 954 708-7543
(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
- ☐ $43.75 Filing Fee & Certificate of Status
- ☐ $43.75 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
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
of

FILED

2019 MAY 22 PM 3: 12

SALVATION BY GRACE MINISTRY INC

(Name of Corporation as currently filed with the Florida Dept. of State)

N19000004395

(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:

____ *The new 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:

____________________, Florida __________
(City) *(Zip Code)*

New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept 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:

X Change	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ____ Change	Trea	Rose Mina Predesma	2212 SW Cameo Blvd
X Add			Port St Lucie, Fl 34953
____ Remove			
2) ____ Change			
____ Add			
____ Remove			
3) ____ Change			
____ Add			
____ Remove			
4) ____ Change			
____ Add			
____ Remove			
5) ____ Change			
____ Add			
____ Remove			
6) ____ Change			
____ Add			
____ Remove			

E. **If amending or adding additional Articles, enter change(s) here**:
(attach additional sheets, if necessary). (Be specific)

Adding IX

No part of the net earnings of the Corporation shall be insure to the benefit of any member, trustee, officer of the Corporation, or any private individual expect that reasonable compensation maybe paid for service endeared to or for the corporation affecting one or more of its purposes, and no member, trustee, officer of the corporate or any private individual shall be entitled to share in the distribution of any of the Corporate assets in dissolution of the Corporation. No substantial part of the activities of the Corporation shall participate in or intervene in, the publication or distribution of statements, of any political campaign on behalf of any candidate for public office.

Upon dissolution of the Corporation or the winding up of its affairs, the assets of the Corporation shall be distributed exclusively to one or more charitable, religious, scientific, testing for public safety, literary or educational organization which then qualify under the provisions of Section 501 (c)(3) of the Internal Revenue Code and its Regulations as they now exist or as they may hereafter amended, or to the federal government, for a public purpose. Any such assets not so disposed of shall be disposed of by the court of Common Pleas of the county in which the principal office of the Corporation in then located, exclusively for such purposes or to such organization or organization as said Court shall determine, which are organized and operated exclusively for such purposes.

5/16/2019

The date of each amendment(s) adoption: ______________________, if other than the date this document was signed.

5/16/2019

Effective date if applicable: ______________________

(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 as the document's effective date on the Department of State's records.

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 May 16, 2019

Signature Lifranc Julmiste

(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)

Lifranc Julmiste

(Typed or printed name of person signing)

President

(Title of person signing)