## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN YABWEH'S RESTING PLACE TEMPLE INC.

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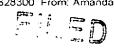
JUN 12 2019

## **COVER LETTER**

IO:	Amendment Section
	Division of Corporations

YABWEH'S RESTING PLACE TEMPLE INC.						
N19000004790 DOCUMENT NUMBER:						
The enclosed Articles of Amendment and fee are subm	utted for filing.					
Please return all correspondence concerning this matter to the following:						
Cheye	Cheyenne Moseley					
-	(Name of Contact Person)					
Legalzo	oom.com, Inc.					
	(Firm/ Company)					
101 N. Bran	101 N. Brand Blvd., 11th Floor					
	(Address)					
Glenda	ale, CA 91203					
	(City/ State and Zip Code	c)				
jenallen813@gmail.com						
E-mail address: (to be used	for future annual report	notification)				
For further information concerning this matter, please of	call.					
Cheyenne Moseley	800 at (	773-0888 ext. 9724				
(Name of Contact Person)	800 773-0888 ext. 9724at (					
Enclosed is a check for the following amount made pay	yable to the Florida Depa	irtment of State.				
☐ \$35 Filing Fee ☐ \$43,75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)				
Mailing Address	Street Address					
Amendment Section Division of Corporations		linent Section on of Corporations				
P.O. Box 6327		Building				
Tallahassee, FL 32314	Executive Center Circle					

Tallahassee, FL 32301



Articles of Amendment to Articles of Incorporation of 2019 JUN 11 AM 10: 05

YABWEH'S RESTING PLACE TEMPLE II	NC.	* * *
(Name of Corporation as currently file	d with the Florida Dept. of State)	
N19000004790		
(Document	t Number of Corporation (if known)	
ursuant to the provisions of section 617,1006, mendment(s) to its Articles of Incorporation:	Florida Statutes, this Florida Not For P	rofit Corporation adopts the follow
. If amending name, enter the new name or	f the corporation:	
Yahweh's Resting Place Temple Inc.		The n
ome must be distinguishable and contain the v Company" or "Co." may not be used in the r		
<ol> <li>Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u></li> </ol>		
Enter new mailing address, if applicable (Mailing address <u>MAY BE A POST OFFI</u>		
). If amending the registered agent and/or new registered agent and/or the new regi		ter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Flor:do street address)	
		. Flotida
	(Cuy)	(Zip Code)
New Registered Agent's Signature, if changi I hereby accept the appointment as registered of	ing Registered Agent: agent. I am familiar with and accept the	

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 tale, 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	PT         John D           V         Mike J           SY         Sally S	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
Change Add Remove			
2) Change Add			
Remove 3.1 Change Add			
Remove 4) Change Add			
Remove			
Add Remove			
6) Change Add Remove	<del></del>		

E. <u>Hamending or adding additional Articles, enter change(s) here:</u> (attach additional sheets, if necessary).—(Be specific)					
(ween intenional success y necessary).	are specific)				
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WALGREENS INFUSION Fax 7275920051

Jun 6 2019 09:57am P006/008

The date of each date this document	amendment(s) adoption:	, if other than the
	·	
Effective date if e		
	(no more than 90 days after amendment file date)	
Adoption of Ame	adment(s) (CHECK ONE)	
	ent(s) was/were adopted by the members and the number of votes cast for the amendment(s) ficient for approval.	
There are no adopted by the	members or members emitted to vote on the amendment(s). The amendment(s) was/were see board of directors.	
Date	5/31/2019	
Sign	ature MC	
	(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)	
	Travis Dean	
•	(Typed or printed name of person signing)	
	President	
· ·	(Title of normal circina)	