N19000009271

(Requ	estor's Name)	
(Addre	ess)	<u>. </u>
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	The Valley of Dry Bo	ones International M	inistries, Inc.		
	N19000009271				
DOCUMENT NUMBER:					
The enclosed Articles of An	nendment and fee are subm	nitted for filing.			
Please return all corresponde	ence concerning this matte	r to the following:			
James Mallory					
	1	(Name of Contact Pe	erson)		_
		(Firm/ Company	·)		_
6756 Cedar Ridge Circle					
		(Address)	-		_
Milton, Fl 32570					
	(City/ State and Zip (Code)		
j.mallory5@yahoo.com					
E	-mail address: (to be used	for future annual rep	ort notification	1)	_
For further information conc	erning this matter, please of	eall:			
James Mallory		at	850	525-2149	
	(Name of Contact Person)			(Daytime Telephone Number)	
Enclosed is a check for the f	ollowing amount made pay	able to the Florida E	Department of S	State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & I Certificate of Status	S43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi Certifi	0 Filing Fee icate of Status ied Copy tional Copy is osed)	
N. # . 117	1 1	43.			

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

The Valley of Dry Bones International Ministries, Inc.

(Name of Corporation as cur	rently filed with the Flor	rida Dept. of State)
N19000009271		
(Document Nu	imber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	tutes, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:	
N/A		The new
name must be distinguishable and contain the word "corpo" "Company" or "Co." may not be used in the name.	oration" or "incorporated	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDRE	<u>SS</u>)	
		-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	,
		;; ?;
	-	5.
D. If amending the registered agent and/or registered of	office address in Florida	enter the name of the
new registered agent and/or the new registered offic		
Name of New Registered Agent: N/A		
		lorīda street address)
New Registered Office Address:		
N/A		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:	
hereby accept the appointment as registered agent. I am		the obligations of the position.
	·	· · ·
	Signature of New Regis	tered 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 <math>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 Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D	Sandra Ximena Velasco Andrade	Calle 13a #24-35
x Add			Barrio las Americas
Remove			Palmira, Valle del Cauca
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

(attach additional sheets, if necessary). (Be specific)
Article VIII
Upon dissolution, all liabilities and obligations shall be paid, satisfied and discharged, or adequate provision shall be made
therefore. Assets not held upon a condition requiring return, transfer, or conveyance to any other organization or individual
shall be distributed, transferred, or conveyed, in trust or otherwise, to charitable and educational organization, organized
under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended, of a similar or like nature to this organization,
as determined by the Board of Directors.

E. If amending or adding additional Articles, enter change(s) here:

The	e date of each amendment(s) adoption:	, if other than the
date	e this document was signed.	
Eff	ective date if applicable:	
.,	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be tument's effective date on the Department of State's records.	: listed as the
Ad	option 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 9/16/2019	
	Signature (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)	
	James Mallory	
	President (Title of person signing)	