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TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION	:	Abundant Life Glo	obal Church, In	c.
DOCUMENT NUMBER:	N20000001927			
The enclosed Articles of Amen				
Please return all correspondenc	e concerning this matte	er to the following:		
		Bishop Daryl Lew	is	
		(Name of Contact F	erson)	-
	A hou	ndant Life Global C	husah lua	
	Abu	nuant Life Global C	nuren, inc.	
		(Firm/ Compan	y)	
	110	00 KINGS RD UNI	Г 43370	
	-	(Address)		<u>.</u>
	<u>:</u>	JACKSONVILLE, F	FL 32203	
		(City/ State and Zip	Code)	
		Darylslewis@yaho	oo.com	
E-m	ail address: (to be used			n)
For further information concerr	ing this matter, please	call:		
Bishop Daryl Lewis			904	233-1919
(Na	ime of Contact Person	at)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follo	owing amount made pa	yable to the Florida	Department of	State:
■ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certif is Certif	icate of Status ied Copy tional Copy is
Mailing Add Amendment S Division of C	Section	Āī	reet Address nendment Sections of Corpo	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

Abundant Life Global Church, Inc.

(Name of Corporation as currently filed with the Florid	la Dept. of State)
N20000001927	•
(Document Nu	mber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statementment(s) to its Articles of Incorporation:	tutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	-
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	The new oration" or "incorporated" or the abbreviation "Corp," or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	SS) No change
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	No Ching
D. If amending the registered agent and/or registered onew registered agent and/or the new registered office	ffice address in Florida, enter the name of the e address:
Name of New Registered Agent:	No change
New Registered Office Address:	(Florida street address)
	, Florida
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am	ed Agent: familiar with and accept the obligations of the position.
	Signature of New Registered Agent, if changing

1807 STA

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>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>D</u>	Helen Lewis	PO Box 43370 Jacksonville, Fl 32203
2) Change Add	Sec	Parrnell Smith	PO Box 43370 Jacksonville, Fl 32203
XXXX Remove 3) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
(attach additional shee	ets, if necessary,	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	

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		<u></u>
		
		
The date of each amendment	Sept 10, 2020	
date this document was signed	(s) adoption:	, if other than the
Effective date if applicable:	Sept 22, 2020	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
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) proval.	

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

09/20/2020

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)

Bishop Daryl Lewis

(Typed or printed name of person signing)

Executive Director

(Title of person signing)