## N20000010389

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## **COVER LETTER**

TO: Amendment Section Division of Corporations'

NAME OF CORPORATION:	ry, Inc.		
N20000010389			
The enclosed Articles of Amendment and fo	ee are submitted for filing.		
Please return all correspondence concerning	this matter to the following	<b>g</b> :	
Cornell Lewis			
	(Name of Contac	et Person)	
5-2 Ministry, Inc.			
	(Firm/ Com	pany)	
5543 Larry St			
<u></u>	(Addres	s)	
Zephyrhills, FL 33542			
	(City/ State and	Zip Code)	
clewis@5-2ministry.com			
E-mail address:	(to be used for future annua	l report notificatio	n)
For further information concerning this ma	tter, please call:		
Cornell Lewis		813 _at	5281286
(Name of Cont	tact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amou	int made payable to the Flor	rida Department of	State:
□ \$35 Filing Fee □\$43.75 Filing Certificate		y Certifopy is Certifopy (Add	0 Filing Fee icate of Status ied Copy itional Copy is osed)
Mailing Address		Street Address	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

5-2 Ministry, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) N20000010389 (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: n/a 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. n/a B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: n/a (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 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) n/a Change Add		n/a	
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			<del></del>
5) Change Add		<del></del>	
Remove			
6) Change Add			
Remove			
		ional Articles, enter change(s) here: essary). (Be specific)	
Please change all purpos	ses, includ	ling any previous changes, to read as in the follow	ving to Articles:
"Said organization is org	ganized e:	xclusively for charitable, religious, educational, and	d scientific purposes, including, for such
purposes, the making of	distributi	ons to organizations that qualify as exempt organiz	tations described under Section 501(c)(3)
of the Internal Revenue	Code, or	corresponding section of any future federal tax cod	e
Upon the dissolution of	the organ	ization, assets shall be distributed for one or more	exempt purposes withing the meaning of

distributed to the federal government, or	to a state or local government, for a public purpose."	
		<del></del>
		<del></del>
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		<del></del>
		. <del></del>
		<del></del>
		<del> </del>
The date of each amendment(s) adopt date this document was signed.	tion:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	<u> </u>
Note: If the date inserted in this block of document's effective date on the Depart	loes not meet the applicable statutory filing requirements, this date will ament of State's records.	not be listed as the
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.
Signature  (Bythe 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)
Cornell E. Lewis
(Typed or printed name of person signing)
President
(Title of person signing)