N21000006573

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dublicos Lilliy Hallis)
(Document Number)
(cocament rolliner)
Out to
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200376663912



11/15/21--01015 024 4495.00



A. RAMSEY DEC 0 9 2021

COVER LETTER

TO: Amendment Section Division of Corporations GREEN PASTURES CHURCH MINISTRY INC NAME OF CORPORATION: N21000006573 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sonia Becerra (Name of Contact Person) Swyft Filings (Firm/ Company) 3 Greenway Plaza #1320 (Address) Houston, TX 77046 (City/ State and Zip Code) pastorsims610@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sonia Becerra 877-777-0450 (Name of Contact Person) (Daytime Telephone Number) (Area Code) Enclosed is a check for the following amount made payable to the Florida Department of State: XI \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is

Mailing Address

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

Street Address

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

Enclosed)

Tallahassee, FL 32303

Articles of Amendment

FILED

Articles of Incorporation of

GREEN PASTURES CHURCH MINISTRY INC

Name of Corporation as currently filed with the Florida I	Dept. of State) St. St. (ART OF STATE
N2	21000006573
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:
Green Pastures Church N	Ministry Lawn Care Inc The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc "
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	17226 S.E. 96th Ave.
,	34491
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	17226 S.E. 96th Ave.
•	Summerfield, FL. US 34491
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a	ce address in Florida, enter the name of the ddress:
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan	Agent: niliar with and accept the obligations of the position
X ————————————————————————————————————	enature 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.

X Change X Remove X Add	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Kange Add	P.S	LADONNA SIMS	17226 S.E. 96th AVC. Summerfield,
Remove 2) Change Add	TD	DAVID SIMS	FL. 34491 US 17226 S.E. 96th Aug Summerfield, FL
Remove 3) X Change Add Remove	<u>D_</u>	DASHAWW SIMS	34491 U.S 17226 S.E. Glork Ave Burgmer tield, FL.
4) Kange Add	\mathcal{D}_{-}	DORINE SIMS	17226 S.E. 96th Ave, Summerfield
Remove Change Add			FL. 34491 US
Remove			
Add Remove			

•	_			
	_		 	
	<u> </u>			
	-			
				
			-	
				
				
				
				 _
	· · · · · · · · · · · · · · · · · · ·			
				
		<u>-</u>		
		_		_
			<u>_</u>	
	·			
The date of each amendment(s) adoption date this document was signed.	n:			, if other than the
Effective date <u>if applicable</u> :				
22	(no more than 90 day	s after amendment	file date)	
Note: If the date inserted in this block doe document's effective date on the Departme	is not meet the application of State's records.	able statutory filing	requirements, this date	will not be listed as the

Adoption of Amendment(s) (<u>CHECK ONE</u>)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

	no members or members entitled to vote on the amendment(s). The amendment(s) was/were s the board of directors.
	gnature $\frac{1/3}{2}$
、	(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)
	Laborn Sims
	(Typed or printed name of person signing)
	LADONNA SIMS - President
	(Title of person signing)