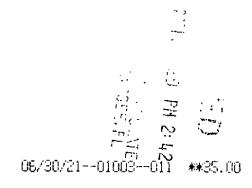
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- STATE CALL FLORIDA

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations ernacle Delivernace Ministry INC. NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) (Firm/ Company) (City/ State and Zip Code) For further information concerning this matter, please call: (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$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 Enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida	Dept. of State)		_
Glory Tabernade Ithin	ver-nace Ministral I	ALC	7
(Document Nun	nber of Corporation (if known)		$\frac{1}{2}$
Pursuant to the provisions of section 617.1006, Florida State	N2 0000	コナ	ナヒ
amendment(s) to its Articles of Incorporation:	mes, this Floriaa Not For Frojit Corporation adopts	the lone	wing
A. If amending name, enter the new name of the corpor	ation:		100
I Got The Victory	Deliverance Minist	1) 1) <i>The</i>	nese
name must be distinguishable and contain the word "corpo		ar "I	nc."
"Company" or "Co." may not be used in the name.		•	
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRES	\underline{S})		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		. 5	
(Mailing duaress MATT DE NT OUT OF THEE BOTA)			
	·:		
	· · ·	<u> </u>	
D. If amending the registered agent and/or registered of		<u>.5</u>	3 :
new registered agent and/or the new registered office	e address:	i-	- 1
Name of New Registered Agent:	<u> </u>	' <u>'</u>	
	· m	2	
	(Florida street address)		-
New Registered Office Address:	·		
	, Florida		
	(City) (Zip Code)		-
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am		n n	
i acres, accept the appearanch as registered agent. I am	familiar our and accept the ornigations of the postuit	78.	
	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	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
I) Change Add	*****		
Remove			
2) Change Add			
Remove 3) Change Add Remove		-	
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addir (attach additional shee	ng additions, if nece	onal Articles, enter change(s) here: essary). (Be specific)	
ADD E	IN	87-1443760	
· ———			

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he date of each amendment(s) adoption:	, if other than the
ate this document was signed.	
Iffective date <u>if applicable</u> :	
Ifective date <u>if applicable</u> : (no more than 90 days after amenda	ment file date)
tote: If the date inserted in this block does not meet the applicable statutory ocument's effective date on the Department of State's records.	filing requirements, this date will not be listed as the
ocument's effective date on the Department of State's records	U i i i i i i i i i i i i i i i i i i i

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.
Dated 6 39 303]
Signature Club Dakem
(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)
Erica Jackson
(Typed or printed name of person signing)
(Title of person signing)