N21000011746

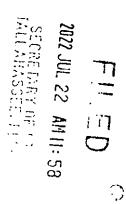
| (Rec | questor's Name) | |
|---------------------------|-------------------|-----------|
| (Add | dress) | |
| (Add | dress) | |
| (City | //State/Zip/Phone | · #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bus | siness Entity Nam | ne) |
| (Doc | cument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to f | Filing Officer: | |
| | J. HOF | RNE |
| | OCT 2 | 2022 |
| | | |

Office Use Only



300391335303

07/22/22--01022--009 **85.00



COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPORATION: | ries of Orlando, Inc | | |
|--------------------------------------------------------------------------|------------------------|------------------------------------------------------------|------------------------------------------------------------------|
| N21000011786 DOCUMENT NUMBER: | | | |
| The enclosed Articles of Amendment and fee are subm | itted for filing. | | |
| Please return all correspondence concerning this matter | to the following: | | |
| Dena T Elmore | | | |
| (| Name of Contact Pers | son) | |
| Divine Orders Ministries of Orlando, Inc | | | |
| | (Firm/ Company) | | |
| 1336 N. Ping Hills Rd | | | |
| | (Address) | | |
| Orlando, FL 32808 | | | |
| (| City/ State and Zip Co | ode) | |
| larryelmore1023@gmail.com | | | |
| E-mail address: (to be used | for future annual repo | rt notification | 1) |
| For further information concerning this matter, please c | rall: | | |
| Dena Elmore | | 121 | 239-4231 |
| (Name of Contact Person) | (, | Area Code) | (Daytime Telephone Number) |
| Enclosed is a check for the following amount made pay | able to the Florida De | epartment of | State: |
| ■ \$35 Filing Fee □ \$43.75 Filing Fee & □ Certificate of Status | | Certifi Certifi | Filing Fee cate of Status ed Copy ional Copy is sed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 | Ame Divis | et Address ndment Secti sion of Corpo Centre of T | rations |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

| Divine Orders Ministries of Orlando, Inc | | E SI |
|---------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------------------------|
| (Name of Corporation as currently filed with the Florida I | Dept. of State) | C.C. J. |
| N21000011786 | | |
| (Document Numb | er of Corporation (if known | |
| Pursuant to the provisions of section 617,1006, Florida Statuto amendment(s) to its Articles of Incorporation: | es, this Florida Not For Pro | fit Corporation adopts the following |
| A. If amending name, enter the new name of the corporat | ion: | TI |
| name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name | tion" or "incorporated" or | The new the abbreviation "Corp." or "Inc." |
| B. Enter new principal office address, if applicable: | N/A | |
| (Principal office address MUST BE A STREET ADDRESS |) | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: | N/A | |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | | |
| | | |
| | | |
| D. If amending the registered agent and/or registered office | ce address in Florida, ente | r the name of the |
| new registered agent and/or the new registered office a | | |
| Name of New Registered Agent: N/A | | |
| | | |
| N = B = 1 = 100 = 411 = = | (Florida s | treet address) |
| <u>New Registered Office Address:</u> N/A | | |
| INA | (City) | , Florida (Zip Code) |
| | . , | (Zip Code) |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai | | bligations of the position. |
| | W. D. C. | |
| Si | gnature of New Registered : | igent, 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.

| Address |
|--------------------------------------------------|
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| ne or more exempt purposes within the meaning of |
| of any future tax code, or shall be distributed |
| ourpose. |
| |
| |

| | | | |
|----------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------|-----------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | - |
| | | | |
| | | | |
| | | | |
| | | | |
| | | ., | |
| | | · | |
| | | | <u> </u> |
| | | | ······ |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| The date of each amendment(s) acdate this document was signed. | loption: | | , if other than the |
| Effective date <u>if applicable</u> : | | | |
| | (no more than 90 days after an | vendment file date) | |
| Note: If the date inserted in this blo document's effective date on the De | ck does not meet the applicable statut partment of State's records. | ory filing requirements, this date | e will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | | |
| | lopted by the members and the number | er of votes east for the amendme | nt(s) |

| • • | 07/19/2022 |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Da | ted |
| | |
| Sig | enature Ulu Service Se |
| | (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) |
| | other court appointed ridderary by that fiduciary) |
| | Dena Elmore |
| | (Typed or printed name of person signing) |
| | _ |
| | Darida + |
| | TRESIDED.1 |
| | (Title of person signing) |