Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

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From:

Account Name : LEGALZOOM.COM INC. Account Number : I20010000062

Phone : (323)962-8600

Fax Number

: (323)962-3889

*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address:___

COR AMND/RESTATE/CORRECT OR O/D RESIGN REAL GM CHURCH INC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

TO: Amendment Section

From: Sylvia Pauli

COVER LETTER

Division of Corporations		
NAME OF CORPORATION:	CH INC	
N21000013782 DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are subr	nitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Chey	enne Moseley	
	(Name of Contact Person	1)
Legalz	zoom.com, Inc.	
	(Firm/ Company)	
101 N. Bra	nd Blvd., 11th Floor	
	(Address)	-
Glend	ale, CA 91203	
	(City/ State and Zip Cod	c)
nhick65@gmail.com		
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
Cheyenne Moseley	800 at (773-0888 ext. 9724
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	iyable to the Florida Depa	utment of State.
☐ \$35 Filing Fee ☐\$43,75 Filing Fee & Certificate of Status		☐S52,50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of FILED

2022 APR -4 AM 7:58

REAL GM CHURCH INC		SECRET . OF STATE
(Name of Corporation as currently filed with the F)	orida Dept. of State)	TALE ALASSEE, FL
N21000013782		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not For Profit Corp</i> or a	tion adopts the following
A. If amending name, enter the new name of the corpora	ition:	
Real God International Ministries Inc.		The new
name must be distinguishable and contain the word "corpore "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the abbrevia	
B. Enter new principal office address, if applicable: (Principal office address MUST BEA STREET ADDRESS)	3)	
C. Enter new mailing address, if applicable; (Mailing address MAYBEA POST OFFICE BOX)		
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		of the
Name of New Registered Agent:		
New Registered Office Address:	(Florido street address)	
	Florida	
(City)	9	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		f the position.
Signature of New	v 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)

To: +18506176380

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 te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	SHENIQUA SMITH	565 SW UNDALLO DRIVE
Add			PORT ST LUCIE, FL 34953
X Remove			
2) X Change	PSD	NICHOLAS ROBERTS	565 SW UNDALLO DRIVE
Add			PORT ST LUCIE, FL 34953
Remove			
3) Change			_
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<u> </u>
6) Change			
Add			···
Remove			

Page: 6 of 7

. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
	· · · · · · · · · · · · · · · · · · ·
	

From: Sylvia Paull

Fhe	edate of each amendment(s) adoption: 02/09/2022	, if other than the
date	this document was signed.	
Elle	ective date it applicable:	_
	(no more than 90 days after amendment file date)	
۸dı	option of Amendment(s) (CHECK ONE)	
a	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 <u>03/25/27</u>	•
	Signature Molos	
	(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)	
	Nicholas Roberts	
	(Typed or printed name of person signing)	
	President	
	(Tute of person signing)	