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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: JOSUS S The answer Church Inc
DOCUMENT NUMBER: NA200008957
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
albert Weathers
JUSIIS AS The Answer Church and
3109 W. Cervantes St
Address Address City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\times \text{\$43.75 Filing Fee & Certificate of Status}\$\$ Certified Copy (Additional copy is enclosed) \$\text{\$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)}\$\$\$
M-00- A A A

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
Tallahassee, FL 32303

Articles of Amendment

to

Articles	of Incorporation
Tesus Is The Ar	isitier Church dinc
(Name of Corporation as currently filed with the Florida D	ept. of State)
2020 MANGE (1)	\mathcal{C}
(Document Number	or of Corporation (if known)
(Document Humbe	Tol Corporation (Il Kilowii)
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	on:
NIA	The new
name must be distinguishable and contain the word "corporati	on" or "incorporated" or the abbreviation "Corp." or "Inc."
"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 ADDRESS)	
•	024
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIH 35
(Mailing undress MAT BE A FOST OFFICE BOX)	
	ω ξ
	22 =
D. If amending the registered agent and/or registered office	e address in Florida, enter the name of the
new registered agent and/or the new registered office ac	Idress:
Name of New Registered Agent:	NIA
of wen negatives rigem.	
New Registered Office Address:	(Florida street address)
· · · · · · · · · · · · · · · · · · ·	n LA
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	
I hereby accept the appointment as registered agent. I am fam	tiliar with and accept the obligations of the position.
	0.10^{-1}
Sig	nature 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: XChange X Remove X Add	<u>V</u> <u>Mike</u>	n Doe c Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	5_	Sandra Weathers	3709 W CUVONES ST.
Remove 2) Change Add	I	Sandra Wnathors	3709 W. Cervantes St Pansarda FL 32505
Remove Change Add	70	Carlos (ampbell	Lay Fanmore Lane Halm Coast FL 32137
Remove 4) X Change Add	\mathcal{D}	Demond Bryant	319 W Cyrumbs St Pansarda AL 32505
Remove 5)ChangeAdd			
Remove 6) Change Add			
Remove E. If amending or add (attach additional sh	ling additional A	articles, enter change(s) here:	
adequate affice H		icles of incorporat	tion to include uses funder
ornius.			

	NA	
	•	
•		
	110 211	
The date of each amendment(s) adoption: _ date this document was signed.	, if other than	n the
<u>-</u>	119211	
Effective date if applicable: (no	more than 90 days after amendment file date)	
	ot meet the applicable statutory filing requirements, this date will not be listed as the	e
Adoption of Amendment(s) (C	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)	

There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
Dated	5.M.aL
Signature	albert flyia
	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)
	Albert Weathers
	(Typed or printed name of person signing)
	Drisinist
	(Title of person signing)