## NA30000H12

(Ro	equestor's Name)
(Ac	ddress)
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MALESSET FLORIDA

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Healing Re NAME OF CORPORATION:	igns, Inc.		
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee	are submitted for filing	<b>7</b> .	
Please return all correspondence concerning	this matter to the follow	ing:	
Joella Galvan			
	(Name of Con	tact Person)	
Healing Reigns, Inc			
	(Firm/ Co	mpany)	
7340 Durden Drive			
	(Addr	ess)	
Pensacola, Florida 32526			
<del></del>	(City/ State an	d Zip Code)	
healingreignsinc@gmail.com			
E-mail address: (to	o be used for future ann	ual report notificati	on)
For further information concerning this matte	er, please call:		
Joella Galvan		850	255-0269
(Name of Contac	et Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount	t made payable to the Fl	orida Department o	f State:
S35 Filing Fee S43.75 Filing Certificate of		opy Cert copy is Cert (Add	50 Filing Fee ificate of Status ified Copy litional Copy is losed)
Mailing Address Amendment Section		Street Address Amendment Sec	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## **Articles of Amendment** Articles of Incorporation of

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		ши	Reigns,	HILL.
•				

## (Name of Corporation as currently filed with the Florida Dept. of State)

	Articles of Amendment	3, A/
	to Articles of Incorporation	335p 1, 50
	of	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
lealing Reigns, Inc.		San
Same of Corporation as currently filed with the	Florida Dept. of State)	777
V23000001472		SPO .
(Docume	ent Number of Corporation (if know	n)
ursuant to the provisions of section 617.1006, Florie mendment(s) to its Articles of Incorporation:	da Statutes, this Florida Not For Pr	ofit Corporation adopts the followin
. If amending name, enter the new name of the	corporation:	
		The new
ome must be distinguishable and contain the word 'Company" or "Co." may not be used in the name.		r the abbreviation "Corp." or "Inc."
. Enter new principal office address, if applicab Principal office address <u>MUST BE A STREET AD</u>		
The office dutiess wood be A BIRDET 710		·
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>ox</u> )	
. If amending the registered agent and/or regist		er the name of the
new registered agent and/or the new registered		er the name of the
		er the name of the
new registered agent and/or the new registered	d office address:	
new registered agent and/or the new registered	d office address:	er the name of the
new registered agent and/or the new registered  Name of New Registered Agent:	d office address:	street address)
new registered agent and/or the new registered  Name of New Registered Agent:	d office address: (Florida	street address) . Florida
new registered agent and/or the new registered  Name of New Registered Agent:  New Registered Office Address:	d office address:  (Florida  (City)	street address)
new registered agent and/or the new registered  Name of New Registered Agent:	d office address:  (Florida  (City)  egistered Agent:	streei address) Florida (Zip Code)

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 John I V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change Add	PCEOD	Joella Galvan	7340 DURDEN DRIVE PENSACOLA, FLORIDA 32526
Remove			
2) X Change Add	SD	Andrea Denise Hudson	1629 J LOWERY ROAD JAY, FLORIDA 32565
Remove Change X Add X Remove	<u>D</u>	Marcus Faulkner	805 WITT LANE PENSACOLA, FLORIDA 32533
4) Change Add	<u>D</u>	Cheryl Golden	9560 BRIDLEWOOD ROAD PENSACOLA, FLORIDA 32526
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
r		atal a control than 1885 a	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

Amend Article III: Delete original statement: Add this statement: "The organization is organized exclusively for chared educational, and scientific purposes under section 501(c)(3) of the Internal Revenue Code, or corresponding section future federal tax code. Upon the dissolution of this organization, assets shall be distributed for one or more exemply within the meaning of 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax could be to the federal government, state or local government, for a public purpose.

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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:  (no more than 90 days after amendment f	île date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 9/11/2-3
Signature Della Andro
(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)
Joella Galvan
(Typed or printed name of person signing)
P, CEO, D
(Title of person signing)