N23000002910

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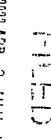
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SEORETARY OF STATE
TALLAHASSEE, FL





COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	Faith Team Ministrie	s International Inc.			
•	000002910				
DOCUMENT NUMBER:					
The enclosed Articles of Amena	ment and fee are subn	nitted for filing.			
Please return all correspondence	concerning this matte	er to the following:			
Robin Lever					
		(Name of Contact I	erson)		
Faith Team Ministries Internation	onal Inc				SECI TA
		(Firm/ Compar	ıy)		一品
305 Luna road					TALAS AHAS
		(Address)			<u> </u>
Auburndale, Florida 33823					STAT
		(City/ State and Zip	Code)		ш
robinlever2015@gmail.com					
E-ma	il address: (to be used	for future annual re	port notification	1)	
For further information concerni	ng this matter, please	call:			
Robin Lever		a	863	4408128	
(Na	me of Contact Person)		(Area Code)	(Daytime Telephone N	umber)
Enclosed is a check for the follo	wing amount made pa	yable to the Florida	Department of	State:	
□ \$35 Filing Fee ■	643.75 Filing Fee & T Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certif is Certif) Filing Fee icate of Status ied Copy tional Copy is ised)	
Mailing Addr Amendment S Division of Co P.O. Box 6327	ection orporations	Ā D	treet Address mendinent Sectivision of Corpe the Centre of T	orations	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

2023 APR - 3 AM II.

Articles of Amendment to Articles of Incorporation of

N/A			
Name of Corporation as currently filed with the Florida	Dept. of State)		
(Document Num	ber of Corporation (if kn	own)	
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not For</i>	Profit Corporation adopts the foll	owing
A. If amending name, enter the new name of the corpor	ation:		
N/A		Th	e new
name must be distinguishable and contain the word "corpor "Company" or "Co," may not be used in the name.	ation" or "incorporated	or the abbreviation "Corp." or ".	Inc."
		_ -!	Ä
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES.	5)		70
		<u></u>	
		<u> </u>	27
	·	<u> </u>	\subseteq
Enter new mailing address, if applicable:		ينز	ψ)
(Mailing address MAY BE A POST OFFICE BOX)			對
			LL,
D. If amending the registered agent and/or registered of	fice address in Florida,	enter the name of the	
new registered agent and/or the new registered office	address:		
Name of New Registered Agent:			
	(Flo	rida street address)	
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code)	_
New Registered Agent's Signature, if changing Registere	d Agent:		
New Registered Agent's Signature, it changing Registered because the appointment as registered agent. I am j	a regult. amiliar with and accept t	he obligations of the position.	
	•		
	Signature of New Registe	red 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 John D V Mike J SV Sally S	ones		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	SECRET TALL/
1) Change Add	D	Robin Lever	305 Luna Road Auburnda	ler Florida
Remove				OF SEE
2) Change Add				FIATE -
Remove 3) Remove Add Remove				
4) Change Add				
Remove				
5) Change Add			-	
Remove				· -
6) Change Add				
Remove				
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)		
	·		5751	

■ 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 member adopted by the boar	ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.
Dated	03/30/2023
(F	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)
	Robin Lever
	(Typed or printed name of person signing)
	Registered Agent
	(Title of person signing)

2023 APR -3 AMII: 11 SECRETARY OF STATE TALLAHASSEE, FL