

173 000013777

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

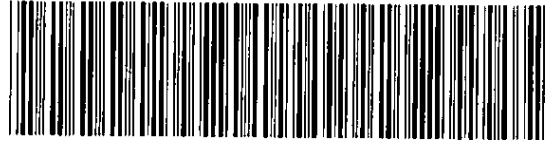
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF SUPERIOR COURT
HALL COUNTY, GEORGIA

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CLERK OF SUPERIOR COURT
HALL COUNTY, GEORGIA

ad

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-624

PLEASE USE FUNDS FROM THIS ACCOUNT: I20210000160: \$35.00

AUTHORIZATION SIGNATURE: _____

Jesus House Ministries Inc.

BUSINESS (Name)

Document # N23000013227

___ Walk in

___ Pick up time _____

___ Mail out

___ Will wait

___ Photocopy

___ Certified Copy of Articles

___ Certificate of Status

NEW FILINGS

___ Profit

___ Not for Profit

___X___ Limited Liability

___ Domestication

___ Other

___ CORP

OTHER FILINGS

___ Annual Report

___ Fictitious Name

___ APOSTIL () _____
Country

AMENDMENTS

___X___ Amendment

___ Resignation

___ Change of Registered Agent

___ Dissolution/Withdrawal

___ Merger

___ Conversion

REGISTRATION/QUALIFICATIONS

___ Foreign filing

___ Limited Partnership

___ Reinstatement

___ Other

EXAMINER'S INITIALS: _____

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TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Jesus House Ministries Inc

DOCUMENT NUMBER: N23000013777

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brian T Till
(Name of Contact Person)

Jesus House Ministries Inc
(Firm/ Company)

6857 SE 11th Pl
(Address)

Ocala Florida 34472
(City/ State and Zip Code)

brookandstoneservices@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rosa Rivera at 850 333-9230
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|---|--|---|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee

2023 NOV 17 AM 11:17
TALLAHASSEE, FL
DIV OF STATE

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Articles of Amendment
to
Articles of Incorporation
of

JESUS HOUSE MINISTRIES INC

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

N23000013777

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation" 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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: N/A

New Registered Office Address:

(Florida street address)

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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TALLAHASSEE, FL

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
-------------------------------	-------	------	---------

1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>Pres</u>	<u>Polanco, Martin T A</u>	<u>6897 SE 11th Pl</u> <u>Ocala Fl 34472</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Pres</u>	<u>Brian T Till</u>	<u>6897 SE 11th Pl</u> <u>Ocala Fl 34473</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u>

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

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CLERK OF DISTRICT COURT
JULIA HANSEN, CLERK
6897 SE 11th Pl
Ocala, FL 34472

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DEPT OF STATE
TALLAHASSEE, FL

The date of each amendment(s) adoption: 11-13-2023, if other than the date this document was signed.

Effective date if applicable: 11-13-2023
(no more than 90 days after amendment file 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 11-17-2023

Signature Brian T Till
(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)

Brian T Till

(Typed or printed name of person signing)

President

(Title of person signing)

CLERK OF STATE
TALLAHASSEE, FL

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