N24950

(Requestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Jesus Christ Inter	national Ministries, Inc.			
N24850 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are s			-	
Please return all correspondence concerning this m	atter to the following:			
Sheldon V Riles				
··· ·	(Name of Contact Pe	rson)		_
Jesus Christ International Ministries, Inc.				
	(Firm/ Company)		_
962 South State Road 7				
	(Address)			_
Margate, FL 33063				
	(City/ State and Zip C	Code)		_
jciminc03@gmail.com				
E-mail address: (to be u	sed for future annual rep	ort notificatio	n)	_
For further information concerning this matter, plea	ase call:			
Sheldon V Riles	at	954	650-4485	
(Name of Contact Pers	son)	(Area Code)	(Daytime Telephone Number)	_
Enclosed is a check for the following amount made	payable to the Florida [Department of	State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Statu	& □\$43.75 Filing Fee & Sectified Copy (Additional copy is enclosed)	Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is osed)	
Mailing Address Amendment Section Division of Corporations	Am	eet Address endment Sect ision of Corpo		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

JESUS CHRIST INTERNATIONAL MINISTRIES, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N24850 (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 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. 962 SOUTH STATE ROAD 7 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) MARGATE, FL 33063 C. Enter new mailing address, if applicable: 962 SOUTH STATE ROAD 7 (Mailing address MAY BE A POST OFFICE BOX) MARGATE, FL 33063 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: SHELDON V RILES Name of New Registered Agent: 11692 NW 2ND DRIVE (Florida street address) New Registered Office Address: Florida 33071 CORAL SPRINGS (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and pecept the obligations of the position.

Signature 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: X Change X Remove X Add	PT John Do Y Mike Jo SV Sally Si	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	СЕОР	ALGIE B POOLE JR	1409 CRESENT HILLS DRIVE TALLAHASSEE, FL 32303
x Remove			
2) Change Add	<u>VD</u>	JERVY V HARPER	2731 SW SABATINI STREET PORT ST LUCIE, FL 34953
X Remove 3) Change Add X Remove	TSD	TERRI L POOLE	1409 CRESENT HILLS DRIVE TALLAHASSEE, FL 32303
4) Change Add	D	WILLIE PERDUE	255 SW 8TH STREET DELRAY BEACH, FL 33444
× Remove			
5) Change Add	PCD	SHELDON V RILES	11692 NW 2ND DRIVE CORAL SPRINGS, FL 33071
Remove			·
6) Change Add	TSD	MELANIE P RILES	11692 NW 2ND DRIVE CORAL SPRINGS, FL 33071
Remove			
E. If amending or addin (attach additional shee	_	icles, enter change(s) here: (Be specific)	
N/A			

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	N/A			·c	
The date of each amendment(s) adoption:				, if oti	ner than the
date this document was signed.					
Effective date if applicable: N/A					
(n	o more than 90 days	after amendment	file date)		
Note: If the date inserted in this block does	not meet the applica	ble statutory filing	requirements, this	s date will not be liste	d 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.

Dated	JULY 5, 2022
Signature	(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)
	SHELDON V RILES
	(Typed or printed name of person signing)

(Title of person signing)

2022 JUL 15 PM 6: 20
PALLAHASSEE FLORIDA