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MAR 3 1 S. PRATHER

COVER LETTER

inc.

TO: Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: The Acts of God's Ministries internation	<u>.</u> a
DOCUMENT NUMBER: N 25000 000 885	_
The enclosed Articles of Amendment and fee are submitted for filling.	
Please return all correspondence concerning this matter to the following:	
Steve Anthony Leonard (Name of Contact Person)	_
The Acts OF God's Ministries International :Inc. (Firm/Company)	_
4119 West Blue Heron Blvd (Address)	-
Riviera Beach FL 33404 (City/ State and Zip Code)	_
The Acts of God Ministries Doutlook. Com E-mail address: (to be used for future annual report notification)	_
For further information concerning this matter, please call:	
Steve Anthony Leonard at 561-729-9857 (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:	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation

2925 (1. . .)

(Name of Corporation as currently filed with the I	Horida Dept. of State)	-
The Acts of God's Min	histries internation	al Inc
	nt Number of Corporation (if known)	<u> </u>
Pursuant to the provisions of section 617,1006, Florid amendment(s) to its Articles of Incorporation:	la Statutes, this <i>Florida Not For Profit Co</i>	orporation adopts the following
A. If amending name, enter the new name of the company and contain the word "Company" or "Co." may not be used in the name.	nistries internation	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>)X</u>)	
D. If amending the registered agent and/or registence new registered agent and/or the new registered		name of the
Name of New Registered Agent:		
<u>New Registered Office Address</u> :	Florala street a	uddress)
_		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registeredy accept the appointment as registered agent.		tions of the position.
	Signature of New Registered Agent	t. 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 V SV	John D Mike Jo Sally S	mes	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change Add		_		
Remove				
2) Change Add		-		
Remove 3) Remove Add Remove		_		
4) Change Add		_		
Remove				
5) Change Add		_		
Remove				
6) Change Add		_		
Remove				
E. If amending or addin (attach additional shee			icles, enter changc(s) here: (Be specific)	
				
	•			

		
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		<u> </u>
The date of each amendment(s) adopt	ion:	if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	rno more inan 20 days aper amenament fue adie)	
<u>Note:</u> If the date inserted in this block d document's effective date on the Depart	oes not meet the applicable statutory filing requirements, this date will not be ment of State's records.	listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	

are no members or members entitled to vote on the amendment(s). The amendment(s) was/were ed by the board of directors.
Dated 2-5-25
Signature S
(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)
Steve Anthony Leonard (Typed or printed name of person signing)
Doctor / Parish