

N25 UUUUU 1347

(Requestor's Name)

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(City/State/Zip/Phone #)

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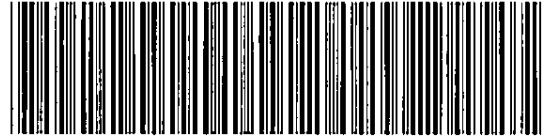
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JESUS-CHRIST THE KING OF KINGS CHURCH MINISTRY, INC.
Name of Corporation

DOCUMENT NUMBER: N25000001347

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

EMMANUEL EUGENE

Name of Contact Person

JESUS-CHRIST THE KING OF KINGS CHURCH MINISTRY, INC.

Firm/Company

1151 SERENITY WAY

Address

IMMOKALEE, FL 34142

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EMMANUEL EUGENE

Name of Contact Person

at (786) 356-2836
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certificate of Status

☐ \$43.75 Filing Fee & Certified Copy

☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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SECTION
TALLAHASSEE, FL
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ARTICLES OF CORRECTION

For

JESUS-CHRIST THE KING OF KINGS CHURCH MINISTRY, INC.

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

N25000001347

Document Number (if known)

Pursuant to the provisions of Section 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

These articles of correction correct NAME OF THE VP

(Document Type Being Corrected)

filed with the Department of State on 02/05/2025

(File Date of Document)

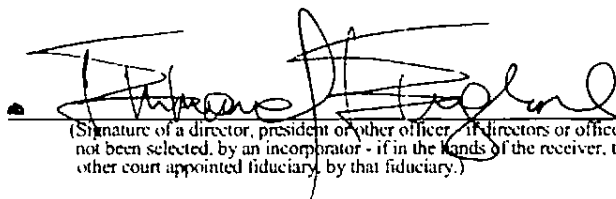
Specify the inaccuracy, incorrect statement, or defect:

THE NAME IS THE VP IS NOT CORRECT.

HER NAME SHOULD BE: EUGENE ALETTE

Correct the inaccuracy, incorrect statement, or defect:

NAME OF THE VP IS: EUGENE, ALETTE


(Signature of a director, president or other officer. If directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

EMMANUEL EUGENE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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