N25029

(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Freewill Chur	ch of God In Christ	
DOCUMENT NUM	IBER: N25029		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
		rietta Brown	
	(Name o	f Contact Person)	
	(Firm	n/ Company)	
		SW Gator Ct.	· .
	((Address)	
-		city, FL 32025	
	(City/ Sta	ate and Zip Code)	
	brown116 E-mail address: (to be use	8@bellsouth.net	cation)
For further informati	on concerning this matter, pleas	se call:	
		at () (Area Code & Dayt	
(Name	of Contact Person)	(Area Code & Dayt	ime Telephone Number)
Enclosed is a check t	or the following amount made	payable to the Florida Departme	nt of State:
	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment **Articles of Incorporation**

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2011 AU	ic 15	Кq	3: 24
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ofFreewill Church of God In Christ, Ing Ch (Name of Corporation as currently filed with the Florida Dept. of State) N25029 (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: Freewill Deliverance Holiness Church, Inc. 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: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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: New Registered Office Address: (Florida street address) Florida 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.

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) <u>Title</u> Name 1 Address Type of Action BD Gertha Mae Perry 346 NE Voss Road ✓ Add ☐ Remove Lake City, FL 32055 ☐ Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: 8-10-11
(date of adoption is required) Effective date if applicable:
(no more than 90 days after amendment file date)
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_August 10, 2011
Signature Long Fitt, Minister
(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, cother court appointed fiduciary by that fiduciary)
Larry Fulton
(Typed or printed name of person signing)
Minister
(Title of person signing)