N47874

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JAN 0 5 2019 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

nitted for filing.		·
r to the following:		
(Name of Contact Person	1)	
NISTRIES, INC.		
(Firm/ Company)		
(Address)		
(City/ State and Zip Code	·)	
for future annual report i	notification	n)
call:		
810 		
(Ar	ea Code)	(Daytime Telephone Number)
yable to the Florida Depa	irtment of	State:
□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Amend Divisio	Street Address Amendment Section Division of Corporations	
	nitted for filing. r to the following: (Name of Contact Person NISTRIES, INC. (Firm/ Company) (Address) (City/ State and Zip Code for future annual report recall: 31.7 yable to the Florida Department of the Florida Department of Copy (Additional copy is enclosed) Street Amend Division	nitted for filing. r to the following: (Name of Contact Person) NISTRIES, INC. (Firm/ Company) (Address) (City/ State and Zip Code) for future annual report notification call: 213 481 at (Area Code) yable to the Florida Department of S43.75 Filing Fee & S52.5 Certified Copy Certif (Additional copy is enclosed) (Address Amendment Sect

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

BIBLICAL RESTORATION INTERNATIONAL MINISTRIES, INC.

(Name of Corporation as current	tly filed with the Florida Dept. of State)
N47874	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:
N/A	The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp." or "Inc."
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: (Mailing address MAY BE A POST OFFICE BOX)	N/A P
	1.00 ± 29
	· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered offic	
new registered agent and/or the new registered office a	ddress:
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far	
	ignature 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.

Examp X Cha X Rer X Ad	mge nove	<u>V</u> <u>Mi</u>	nn Doe ke Jones lly Smith	
<u>Type o</u> (Check	f Action One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)	_ Change	TD	PRUITT, CHER	902 LOCHMONT DR.
	Add			BRANDON FL
X	Remove			33511
2)	_ Change	SD	RYAN, BARNETT C	11643 DECLARATION DR.
	_ Add			TAMPA FL
X	Remove			33635
3)	Change	TD	WADDELL, ROBERT J.	1406 MISSISSIPPI AVE.
X	Add			LYNN HAVEN.,
	Remove			32444
4)	_ Change	SD	WADDELL, ROBERT J.	1406 MISSISSIPPI AVE.
V.	Add			LYNN HAVEN.,
	Remove			32444
5)	_ Change			
	_ Add			
	Remove			
6)	_ Change			
	Add			
	Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	icles, enter change (Be specific)	(s) here:		
N/A				
				 - .
	"			
-				
			·	
		<u>,</u>		

•	N/A	
The date of each ame date this document was	·	, if other than the
Effective date if appli	SEPTEMBER 16, 2018 cable:	
	(no more than 90 days after amendment file date)	
	ted in this block does not meet the applicable statutory filing requirements, this date will not ate on the Department of State's records.	t be listed as the
Adoption of Amendm	ent(s) (<u>CHECK ONE</u>)	
☐ The amendment(s was/were sufficies) was/were adopted by the members and the number of votes cast for the amendment(s) at for approval.	
There are no men adopted by the bo	abers or members entitled to vote on the amendment(s). The amendment(s) was/were pard of directors.	
Dated	DECEMBER 16, 2018	
Signatur	· Same L. Smutt	
C	(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)	
	PRUITT, JAMES L.	
	(Typed or printed name of person signing)	
	PRESIDENT / PRINCIPAL DIRECTOR	
	(Title of person signing)	