N9300000 4240

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COVER LETTER

TO: Amendment Section Division of Corporations

New Covenant International Incorporated NAME OF CORPORATION:
N93000004240 DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
CHESTER CLARKE
(Name of Contact Person)
NEW COVENANT INTERNATIONAL, INC
(Firm/ Company)
6151 NE 185 TERRACE
(Address)
WILLISTON, FL 32696
(City/ State and Zip Code)
ches2113@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Chester Clarke 352 317 1594 at
(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:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& \Bigcup \\$43.75 Filing Fee \& \Bigcup \\$52.50 Filing Fee \& \Bigcup \\$52.50 Filing Fee \& \Bigcup \\$certificate of Status \\ (Additional copy is enclosed) \\ (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

to

Articles of Incorporation

of

NEW COVENANT INTERNATIONAL INCORPORA	TED	FILED
(Name of Corporation as c	urrently filed with the F	lorida Dept. of State)
N93000004240X		2019 OCT 15 P 5:45
Pursuant to the provisions of section 617,1006, Florida S	Number of Corporation (i	f known)
amendment(s) to its Articles of Incorporation:		
A. If amending name, enter the new name of the corp	poration:	
		The new
name must be distinguishable and contain the word "co." "Company" or "Co." may not be used in the name.	rporation" or "incorpore	ited" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		da, enter the name of the
Name of New Registered Agent:		
– <u>New Registered Office</u> Addres <u>s</u> :		(Florida street address)
		rt
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	tered Agent:	
	Signature of New Re	gistered 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	<u>v</u> <u>M</u>	hn <u>Doe</u> ike Jones illy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	KEVIN DYSON	19 CURTIS STREET
Add			MOUNTAIN CREEK
X Remove			Q1.D4557
2) Change	PD	ROBERT ABRAMSON	738 PINE BARK DRIVE
X Add			LAKE WORTH, FL 33467
Remove			
3) Change	D	ANDREAS FRANZ	HANSENSTRABE 41A
X Add			BARLEBAN 39179
Remove			GERMANY
4) Change	D	JORGE STRATE	8 GREENWAYS
X Add			CHELMSFORD, ESSEX CM1-41
Remove			UNITED KINGDOM
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding addit ttach additional sheets, if ne	cessary). (Be specific)			
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SEPTEMBER 30, 2019 . if other than the The date of each amendment(s) adoption: date this document was signed. SEPTEMBER 30, 2019 Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed 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. There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors. **OCTOBER 9, 2019** Dated

(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)

Signature

DR. ROBERT ABRAMSON

(Typed or printed name of person signing)

PRESIDENT, NEW COVENANT INTERNATIONAL

(Title of person signing)