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(Bu	isiness Entity Nar	me)	
(Document Number)			
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01/28/15--01023--007 **43.75

COVER LETTER

TO: Amendment Section Division of Corporations

bivision of Corporations		
NAME OF CORPORATION: Full Gospe	el COGIC I	Holding Corp. Inc
DOCUMENT NUMBER: N94000024	489	
The enclosed Articles of Amendment and fee are subm	itted for filing.	
Please return all correspondence concerning this matter	to the following:	
Elder Robert Douglas, Jr	, •	
	Name of Contact Persor	1)
Full Gospel COGIC Hold	ing Corp. I	nc
	(Firm/ Company)	
1904 E. Osborne Avenue	9	
	(Address)	
Tampa, Fl 33610		
(City/ State and Zip Code	e)
fgcogicoftampa@g	gmail.com	
E-mail address: (to be used i	or future annual report	notification)
For further information concerning this matter, please c	ail:	
Robert Douglas, Jr.	813	516-4083
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida Depa	artment of State:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street Address	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations	
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



15 JAN 28 AM 8: 30 Full Gospel C-O-G-I-C Holding Corp. Inc (Name of Corporation as currently filed with the Florida Dept. of State) N94000002489 (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: Full Gospel Church of Tampa, Inc. 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: (Florida street address) New Registered Office Address: 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.

Page 1 of 4

IIIIIIIISignature 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.

Example: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sn	<u>nes</u>	
Type of Action (Check One)	Title N/A	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add		· · · · · · · · · · · · · · · · · · ·	
Remove			
6) Change		11 11 11 11 11 11 11 11 11 11 11 11 11	
Add			
Remove			

E. If amending or additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
	NIA			· · · · · · · · · · · · · · · · · · ·	
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The	edate of each amendment(s) adop	tion:		if other than the
date	this document was signed.		SECRETARY DIVISION OF CO	OF STATE
Eff	ective date <u>if applicable</u> :		DIAI2ION OF GO	
		(no more than 90 days after amendment file date)	15 JAN 28	AM 8: 30
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)		
	The amendment(s) was/were adop was/were sufficient for approval.	ted by the members and the number of votes cast for the a	mendment(s)	
	There are no members or members adopted by the board of directors.	s entitled to vote on the amendment(s). The amendment(s) was/were	
	Dated 1/18/20	15		
	Signature Kolon			
		n or vice chairman of the board, president or other officer		
		selected, by an incorporator – if in the hands of a receiver, sointed fiduciary by that fiduciary)	, trustee, or	
	Rob	ent JAMES DOCK/AS Jr	_	
	(T	yped or printed name of person signing)		
	PA.	stor	_	
	•	(Title of person signing)		