N95000003380

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denora allen-Johnson Jave permission 40 White out the words "dba" in paragraph A.

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	<u>COVER LETTER</u>
TO: Amendment Section Division of Corporati	ions
NAME OF CORPORAT	House of God Miracle Temple of Carol City, Inc.
DOCUMENT NUMBER	N95000003380
The enclosed Articles of A	Amendment and fee are submitted for filing.
Please return all correspon	idence concerning this matter to the following:
Lenora Allen-Johnson	
	(Name of Contact Person)
House of God Miracle Ter	mple of Carol City, Inc. (HGMTCC)
	(Firm/ Company)
P. O. Box 245476	
	(Address)
	(Address)
	33024
Pembroke Pines, Florida 3	(City/ State and Zip Code)
Pembroke Pines, Florida 3 lallen_johnson@yahoo.coi	(City/ State and Zip Code) m
Pembroke Pines, Florida 3 lallen_johnson@yahoo.coi	(City/ State and Zip Code)
Pembroke Pines, Florida 3 lallen_johnson@yahoo.co	(City/ State and Zip Code) m
Pembroke Pines, Florida 3 lallen_johnson@yahoo.co For further information cor	(City/ State and Zip Code) m H-mail address: (to be used for future annual report notification) neerning this matter, please call: 954 310-5256
Pembroke Pines, Florida 3 lallen_johnson@yahoo.co For further information cor	(City/ State and Zip Code) m TE-mail address: (to be used for future annual report notification) ncerning this matter, please call: at
Pembroke Pines, Florida 3 lallen_johnson@yahoo.co For further information cor Lenora Allen-Johnson	(City/ State and Zip Code) m H-mail address: (to be used for future annual report notification) ncerning this matter, please call: at <u>954</u> 310-5256
Pembroke Pines, Florida 3 lallen_johnson@yahoo.cor For further information cor Lenora Allen-Johnson	33024 (City/ State and Zip Code) m
Pembroke Pines, Florida 3 lallen_johnson@yahoo.cor For further information cor Lenora Allen-Johnson Enclosed is a check for the Enclosed is a check for the \$35 Filing Fee <u>Mailing</u>	33024 (City/ State and Zip Code) m Itemail address: (to be used for future annual report notification) ncerning this matter, please call: (Name of Contact Person) at 954 310-5256 (Name of Contact Person) at 1 (Area Code) (Daytime Telephone Number) s following amount made payable to the Florida Department of State: State: Street Address Street Address
Pembroke Pines, Florida 3 lallen_johnson@yahoo.cor For further information cor Lenora Allen-Johnson Enclosed is a check for the Enclosed is a check for the \$35 Filing Fee <u>Mailing</u> Amendm	(City/ State and Zip Code) m
Pembroke Pines, Florida 3 lallen_johnson@yahoo.co For further information cor Lenora Allen-Johnson Enclosed is a check for the S35 Filing Fee <u>Mailing</u> Amendm Division P.O. Box	(City/ State and Zip Code) m

Articles of Amendment to Articles of Incorporation of

House of God Miracle Temple of Carol City, I
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N9500003380

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The new

(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:

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

House of God Miracle Temple of Carol City Holy Sanctuary of Blessings and Deliverance. Inc. "HGMTCC"

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. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)

С.	Enter new mailing address, if applicable:	
	(Mailing address MAY BE A POST OFFICE B	OX

P.O. Box 245476

Pembroke Pines, FL 33024

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: N/A

New Registered Office Address:

N/A

(Florida street address)

(Zip Code)

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.

(Cin)

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)

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>V</u> <u>Mil</u>	<u>n Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>-</u> .		
Remove			
2) Change Add		<u></u>	
3) Remove Change Add Remove			
4) Change Add			
Remove			·····
5) Change Add		····	
Remove			Manager
ኛ) Change ለ.dd			
Remove			

E. <u>If amending or adding additional Articles, enter change(s) here</u> (attach additional sheets, if necessary), (Be specific)

N'A

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The date of each amendment(s) adoption: June 17, 2021

_____, if other than the

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June 21, 2021 Effective date if applicable:

date this document was signed

(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 east 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.

June 22, 2021 Dated J; Signature (By the chairman or vice chairman of the board, president or other officer-if directors

(By the chairman of vice chairman of the board, president of other other-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)

Lenora Allen-Johnson

(Typed or printed name of person signing)

Pastor/President

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(Title of person signing)