N9500005681

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2014 HAY 28 PM 4: 50
STATE OF STATE
AND SEE FLORIDA



COVER LETTER ,

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Church F	oundational	Network
DOCUMENT NUMBER: N9500005	5681	
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Dave Stafford		
	(Name of Contact Person)
Liberty Network Internat	ional	
	(Firm/ Company)	
2221 S Blue Angel Pkwy	У	
	(Address)	
Pensacola, FL 32506		
	(City/ State and Zip Code	e)
dave@libertychu	rch.net	
E-mail address: (to be used	d for future annual report i	notification)
For further information concerning this matter, please	e call:	
Dave Stafford	_{at} 850	466-5388
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Depa	ertment of State:
\$35 Filing Fee \$\bigs\tag{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	Street Address Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee FL 32314	Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

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2014 HAY 28 PX 4:50 Church Foundation Network, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N95000005681 (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: Liberty Network International 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. Same B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: Same (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: Same Name of New Registered Agent. (Florida street address) New Registered Office 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.

Page 1 of 4

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: X_Change X_Remove A_Add	<u>V</u> <u>Mil</u>	nn <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VD	JACK HOLLIS	POST OFFICE BOX 450 NA
Add			MARIANNA, FL 32446
X Remove			
2) X Change	SD	MARC LIMBAUGH	555 NEWNAN ROAD
Add			CARROLTON, GA 30117
Remove	TD	Thomas D Stafford	32891 Arbor Ridge Circle
X Add			Lillian, AL 36549
Remove			
4) Change	 		
Add			
Remove			
5) Change			
Add			-
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:					
(attach additional sheets, if necessary). (Be specific)					
ARTICLE I NAME CHANGE					
					

Fhe date of each amendment(s) adoption:		, if other than the
	ective date if applicable:	
EII	(no more than 90 days after amendment file date)	
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
	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.	
	Signature (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 oburt appointed fiduciary by that fiduciary)	
	BUFORD M LIPSCOMB	
	(Typed or printed name of person signing)	
	Executive Director	
	(Title of person signing)	