## 11960000003623

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SECRLTARY OF STATE
AND AMASSEE. FLORIDA

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

•

NAME OF CORPORATION: LIGHTHOUSE FELLOWSHIP INC
DOCUMENT NUMBER: <u>N 96 000003623</u> (3)
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
NORMAN COX (Name of Contact Person)
KINGDOM LIFE (Firm/ Company)
1816 6# 5T. S.E. (Address)
WINTER HAVEN, FL. 3388D (City/ State and Zip Code)
For further information concerning this matter, please call:
NORMAN COX at (\$63) 604-0925 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassec, FL 323142661 Executive Center CircleTallahassee, FL 32301

## **Articles of Amendment** to

Articles of Amendment	
to .	
Articles of Incorporation	
of Soldy "	
Articles of Amendment to  Articles of Incorporation of  LIGHTHOUSE FELLOWSHIP INC ALLOWSHIP (Name of corporation as currently filed with the Florida Dept. of State)  N9600003623 (3)	
(Name of corporation as currently filed with the Florida Dept. of State)	9.
$\langle \hat{\mathcal{L}}_{\mathcal{L}}^{\mathcal{A}} \rangle$	Sx 6
1/9/20000 3/622 (3)	13/2
$\frac{N9600003623}{\text{(Document number of corporation (if known)}}$	0
(in common transfer of conference (in this way	• •
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:	
NEW CORPORATE NAME (if changing):	
KINGDOM LIFE INC	
(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may <u>not</u> be used in the name of a not for profit corporation)	
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	

(Attach additional pages if necessary) (continued)

The date of adoption of the amendment(s) was:
Effective date if applicable: (no more than 90 days after amendment file date)
(no more diam 70 days area amonament int care)
Adoption of Amendment(s) ( <u>CHECK ONE</u> )
The amendment(s) was (were) adopted by the members and the number of votes cas for the amendment was sufficient for approval.
There are no members or members entitled to vote on the amendment. 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 court appointed fiduciary, by that fiduciary.)
MORMAN COX (Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

**FILING FEE: \$35**