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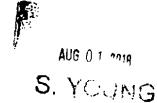
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	The La	amb's	Temple	<u>Resource</u>	Ministr
DOCUMENT NUMBER:	96000	0060	18		
The enclosed Articles of Amendment	and fee are subr	mitted for filing			
Please return all correspondence conc	erning this matte	r to the followi	ng:		
Dana Gile	rease				
,		(Name of Cont	tact Person)		
The lan	b Tem	.ple			
		(Firm/ Co	mpany)		
410 Parker-K	night	Rd.	ess)		
Midway, FL.	3234	(City/ State and	d Zip Code)	,	
	lress: (table used	()		cation)	
For further information concerning th	is matter, please	call:			
Dana Gilcre	CSC Contact Person	,	at <u>85</u> (Area C	D - 274-(0355
Enclosed is a check for the following			•		one stanioer)
	75 Filing Fee & ficate of Status	Certified Co (Additional enclosed)	py copy is	\$52.50 Filing Fee Certificate of Status Certified Copy (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

Articles of Incorporation of

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	source Minis	tries, Inc.		
Name of Corporation as	s currently filed with the Flor	ida Dept. of State)		
(Docume)	nt Number of Corporation (if k	 10wn)		
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	la Statutes, this <i>Florida Not Fo</i>	r Profit Corporation adop	ts the following	
A. If amending name, enter the new name of the c	orporation:		<u> </u>	
The Lamb Temple of God name must be distinguishable and contain the word "	Working in the	Earth Minis	try The new	
name must be distinguishable ahd contain the word " "Company" or "Co." may not be used in the name.			orp. [or Tinc.	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)	DRESS) Midway,	Knight Rd.		
	Mid way,	HL 36343		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	ox 410 Par	Ker-Knight	Rd.	
	Midway	FL 32343)	
	<u> </u>			
D. If amending the registered agent and/or register	ered office address in Florida.	enter the name of the		
new registered agent and/or the new registered		_		
Name of New Registered Agent:	Dana Stre	ase OI		
_	410 rarker-	night KCI. Iorida street address)		
New Registered Office Address:	.		20212	
_	Midway (City)	Florida (Zip Cod	32345 le)	
New Registered Agent's Signature, if changing Re	gistered Agent:			
I hereby accept the appointment as registered agent.	I am familiar with and accept	the obligations of the posi	ition.	
	Lana Du	Crease	<u> </u>	
	Signature of New Regis	tered Agent, if changing		-71
			L 2	
	Page 1 of 4			Ē
			- 문자 - 유가 - 유가	

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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	I	Christine Graham	410 Parker-Knight Ro
Add			Midway, PL 32343
Remove	_	_	
2) Change Add	T	Dana Gilcrease	410 Parker-Knight F Midway, FL 32343
_ 			17119000111 - 333 (3
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove		•	
6) Change			
Add			
Remove			

F. If amending or adding additional Arti- (attach additional sheets, if necessary).	icles, enter change(s) here:
(anuch additional sheets, if necessary).	(be specific)
<u> </u>	
· · · · - · · · · · · · · · · · · · · ·	
1.0	

The date of each amendment(s) adoption: 7/22/18 date this document was signed.	, if other than the
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 document's effective date on the Department of State's records.	not be listed as the
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.	
Dated 7/23/18 Signature Multinary and	
(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)	
Willie Lamb Sr. (Typed or printed name of person signing)	
President	
(Title of person signing)	

To	whom	it	may	concern
10	WHOH	1 r	HILLY	COHCCIII

I release document N18000004999 to be filed for document N96000006078 for the new change.

Thank you.

Dana Gilcrease