

N960000006172

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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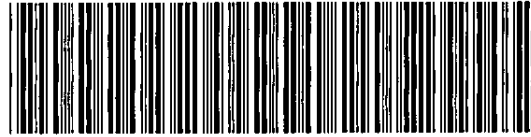
(Business Entity Name)

(Document Number)

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RECEIVED
11 DEC -2 PM 3:09
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
11 DEC -2 PM 3:11
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DR
12/2/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: WORLD WIDE CHRISTIAN MINISTRY INCORPORATED

DOCUMENT NUMBER: N96000006172

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ELIJAH A. HARVEY

(Name of Contact Person)

WORLD WIDE CHRISTIAN MINISTRY INC

(Firm/ Company)

POST OFFICE BOX 928

(Address)

CRAWFORDVILLE, FLORIDA 32326

(City/ State and Zip Code)

elijahaharvey@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ELIJAH A. HARVEY

(Name of Contact Person)

at (850) 566-0724

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
to
Articles of Incorporation
of

WORLD WIDE CHRISTIAN MINISTRY INCORPORATED

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

N96000006172

(Document Number of Corporation (if known))

FILED

DEC -2 PM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

The new 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**)

122 ROBERTS/WILLIAMS ROAD

CRAWFORDVILLE, FL 32327

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

POST OFFICE BOX 928

CRAWFORDVILLE, FL 32326

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:

_____, Florida _____
(City) (Zip Code)

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.

Signature of New Registered Agent, if changing

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

<u>Title(s)</u>	<u>Name</u>	<u>Address</u>
1) PD	WILLIAM, ROBBIE G	13393 NE 21ST AVE SPARR, FL 32192
2) VD	WILLIAMS, ARCHIE D	13351 NE 21ST AVE SPARR, FL 32192
3) TD	HARVEY, ELIJAH A	9 HENRY DRIVE CRAWFORDVILLE, FL 32327
4) SD	DIXON, MARVIA GENESE	6105 SEE 227 TERR HAWTHORNE, FL 32640
5) SD	PORTER, SANDRA	8 P.A. SANDERS ROAD SOPCHOPPY, FL 32358
6) _____	_____	_____ _____ _____

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

<u>Title(s)</u>	<u>Name</u>	<u>Title(s)</u>	<u>Name</u>
1) SD	WILLIAMS, DIANA	4) _____	_____
2) _____	_____	5) _____	_____
3) _____	_____	6) _____	_____

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The date of each amendment(s) adoption: _____

11-30-11

Effective date if applicable: _____

(no more than 90 days after amendment file date)

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

November 30, 2011

Signature

Robbie G. Williams

(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)

ROBBIE G. WILLIAMS

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)