## N97000001800

(Red	questor's Name)	
(Ado	dress)	
(Add	dress)	
(City	//State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	me)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	
		Amend





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S. CHATHAM
JUN 2 2 2025



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

4

Al Gallon Ministry NAME OF CORPORATION:			
N97000001800			
DOCUMENT NUMBER:			·
The enclosed Articles of Amendment and fee are sub-	mitted for filing.		
Please return all correspondence concerning this matter	er to the following:		
Alfonso Gallon			
	(Name of Contact Per	son)	· <del>-</del>
Al Gallon Ministry			
	(Firm/ Company)		
11530 Walker Road			
	(Address)		
Thonotosassa			
	(City/ State and Zip C	ode)	
Florida			
E-mail address: (to be used	for future annual repo	nt notification	)
For further information concerning this matter, please	call:		
Alfonso Gallon	at	313	856-7713
(Name of Contact Person		Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida D	epartment of	State:
☐ \$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Al Gallon Ministry		
(Name of Corporation as currently filed with the F	lorida Dept. of State)	
N97000001800		
(Documen	nt Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	corporation" or "incorporated	The new d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable	e:	
(Principal office address MUST BE A STREET ADI		
		-2. 2
		25
C. Futou non-mailing address if applicables		APP
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	DX)	2
		S
		<del></del>
		コ <u>ラ</u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered	red office address in Florida office address:	, enter the name of the
Name of New Registered Agent:		
_		
New Registered Office Address:	(1	lorida street address)
_		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept	t the obligations of the position.
	Signature of New Regist	tered 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 X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3 ) Change Add Remove	<del></del>		
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
		onal Articles, enter change(s) here: essary). (Be specific)	
		mmunity foundation with the initiatives of AG	
public service activities a	imed at p	romoting civic engagement, humanitarian effor	rts,economic, community housing
development and rehabili	ition, as w	rell as communinty support and education.	
<del></del>			

	o engage in a broad range of public service initiatives pror	
-	omic development supporting community housing through	· · · · · · · · · · · · · · · · · · ·
providing education and support to s	strenghten communities by public service activities aimed	at promoting civic, humanitian,
economic community housing, deve	lopment, education and rehabilitation.	
-		
		200
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<u></u>		Sic
		N
		<b>O</b> 0
The date of each amendment(s) addate this document was signed.	Soption: March 10,2025	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory filing requireme partment of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for that.	ne amendment(s)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.		
April 16,2025 Dated		
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)		
Alfonso Gallon		
(Typed or printed name of person signing)		
CEO		

(Title of person signing)

