N9700001970

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	ORATION: True Fellowsh	ip Worship Ministry, In	<u>c</u>
DOCUMENT NUM	MBER: <u>N97000001970</u>		
The enclosed Article	es of Amendment and fee are sub	mitted for filing.	
Please return all cor	respondence concerning this matt	er to the following:	
		ron Boykin	
	(Name of	Contact Person)	
	True Fellowship	Worship Ministry, Inc	
16-16-2000-24	(Firm	/ Company)	
	2332 N . I	Dixie Highway	
	(A	Address)	
	hollywo	od, fla 33021	
		e and Zip Code)	
		@yahoo.com d for future annual report notifi	cation)
For further informat	ion concerning this matter, please	e call:	
sharon Boykin		at (954 ₎ 295-82	55
(Nam	e of Contact Person)	(Area Code & Dayt	ime Telephone Number)
Enclosed is a check	for the following amount made pa	ayable to the Florida Departme	nt of State:
	☐ \$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 Copyis enclosed)
Amo Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Street Address Amendment Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	er Circle

Articles of Amendment to Articles of Incorporation of

True Fellowship Worship Ministry, Inc (Name of Corporation as currently filed with the Florida Dept. of State) N9700001970 (Document Number of Corporation (if known)

(Document Number of Cor	•
Pursuant to the provisions of section 617.1006, Florida Stathe following amendment(s) to its Articles of Incorporation	· · · · · · · · · · · · · · · · · · ·
A. If amending name, enter the new name of the corpo	ration:
True Fellowship Wors	hip Center, Inc
The new name must be distinguishable and contain the abbreviation "Corp." or "Inc." "Company" or "Co." ma	
B. Enter new principal office address, if applicable:	3000 Sterling Road, Ste 104
(Principal office address MUST BE A STREET ADDRE	Hollywood, Fla. 33021 P
	TALE SE
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	JUN 20
	5 v
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 offic	ce address:
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:
I hereby accept the appointment as registered agent. position.	I am familiar with and accept the obligations of the
Signature of	New Registered Agent if changing

Signature of New Registerea 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 tadditional sheets, if necessary)

Title <u>Name</u> <u>Address</u> **Type of Action** ☐ Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: May 26, 2011		
Effective date if applicable:	(date of adoption is required) May 26, 2011	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.	
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.	
hav	the chairman or vice chairman of the board, president or other officer-if directors re not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)	
	Sharon J. Boykin (Typed or printed name of person signing)	
	President [TVD]	
	(Title of person signing)	