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Chamber of Samuel Chamber

COVER LEFTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: _	New Wine Min	istries Church Internat	ional inc.		
DOCUMENT NUMBER:	N9900000146	7			
The enclosed Articles of Amendm	ent and fee are subm	nitted for filing.			**************************************
Please return all correspondence ed	oncerning this matter	to the following:			
•		Valerie T. March			
	1	Name of Contact Pers	on)		
		(Firm/ Company)			
	3	361 Largo Cay Ct #101	I		
		(Address)			
		Ococe, Florida 34761			
	(City/ State and Zip Co	ode)		
		valerietmarch@aol.c			
E-mail	address: (to be used	for future annual repor	rt notification	n)	
For further information concerning	this matter, please of	call:			
\	'alerie T. March	at	407	545-0230	
(Name	of Contact Person)	(.	Area Code)	(Daytime Teleph	ione Number)
Enclosed is a check for the following	ng amount made pay	yable to the Florida De	partment of	State:	
■ \$35 Filing Fee □\$4 Co	43.75 Filing Fee & lertificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certit Certif (Addi	0 Filing Fee leate of Status led Copy tional Copy is osed)	
<u>Mailing Addres</u> Amendment Sec			et Address Indment Sect	ion	
Division of Corp P.O. Box 6327		Divis	sion of Corp on Building		

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

New Wine Ministries Church International Inc.

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

N99000001467

(Document Number of Corporation (if known)

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:

name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "incorporated" or "incorp	· ·	ies Church International Inc.	The nev
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: (Florida street address)		corporation" or "incorporated"	or the abbreviation "Corp," or "Inc."
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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:			
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:	Principal office address <u>MUST BE A STREET ADD</u>	<u>ORESS</u>)	
O. 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:			
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:		DX)	
new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address:			
new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address:			
Name of New Registered Agent: (Florida street address) New Registered Office Address:			nter the name of the
(Florida street address) New Registered Office Address:	new registered agent and/or the new registered	office address:	
New Registered Office Address:	Name of New Registered Agent:		
, Florida	<u>New Registered Office Address</u> :	(Flor	ida street address)
			, Florida
(City) (Zip Code)	_	(City)	
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			ne obligations of the position

if amending the Officer 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>	Address
1) Change			
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E.	If amending or adding additional Art	icles, enter change(s) here:
	If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
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ı ne	date of each amendment(s) and	pnon:	, ii other than the
iate	this document was signed.		
Effe	ctive date if applicable:		
		(no more than 90 days after amendment file date)	
	e: If the date inserted in this blocument's effective date on the Dep	k does not meet the applicable statutory filing requirements, this date will artment of State's records.	not be listed as the
Ado	ption of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s).	
	There are no members or member adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were is.	
	Dated	March 11th, 2019	
	Signature /	yn.	
	have not bee	nan or vice chairman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or oppointed fiduciary by that fiduciary)	
		Anthony J. March	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	