## N9900006573

(Re	equestor's Name)	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: RESTORATION OF L	IFE MINISTRIES INTERI	NATIONAL, I	NCORPORATED	
DOCUMENT NUMBER:	N99000006573				·
The enclosed Articles of Am	nendment and fee are subm	nitted for filing.			
Please return all corresponde	ence concerning this matter	r to the following:			
É Louis					
		(Name of Contact Pers	on)		
Kingdom So	und International, Inc.				
	• ,, , , , , , , , , , , , , , , , , ,	(Firm/ Company)	· · · ·		
1040 Cameo	Circle West Palm Beach, Fl 33	417			
		(Address)			
<del></del>		(City/ State and Zip Co	ode)		<del></del>
E	-mail address: (to be used	for future annual repor	t notification	)	
For further information conc	erning this matter, please o	call:			
	E Louis	at	561-33	1-1515	
	(Name of Contact Person)	(4	Area Code)	(Daytime Telephone Num	ber)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida De	partment of	State:	
<b>⊠</b> \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	1\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee cate of Status led Copy tional Copy is sed)	
Mailing A	ddress	Stree	t Address		

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



April 27, 2017

E. LOUIS 1040 CAMEO CIRCLE WEST PALM BEACH, FL 33417

SUBJECT: RESTORATION OF LIFE MINISTRIES INTERNATIONAL,

**INCORPORATED** 

Ref. Number: N9900006573

We have received your document for RESTORATION OF LIFE MINISTRIES INTERNATIONAL, INCORPORATED and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Initials are not acceptable for the names of officer, director and registered agent. You must list entire name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 017A00008231

Carol Mustain Regulatory Specialist II

www.sunbiz.org

## Articles of Amendment to Articles of Incorporation of

RESTORATION OF LIFE MINISTRIES INTERNATIONAL, INCORPORATED

(Name of Corporation as N9900	currently 00006573	filed with the Flori	da Dept. of Stat	<u>e</u> )	<del></del>	
(Documen	t Number	of Corporation (if kn	own)		<del></del>	
Pursuant to the provisions of section 617.1006, Florids amendment(s) to its Articles of Incorporation:	a Statutes, 1	this <i>Florida Not For</i>	Profit Corporati	lon adop	ts the following	I
A. If amending name, enter the new name of the co	rporation	<u>.</u>				
Kingdom Sound International, Inc.					The new	
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation	" or "incorporated"	or the abbrevia	tion "Co		
B. Enter new principal office address, if applicable:		5300 Elmhurst Road	ı			
Principal office address <u>MUST BE A STREET ADD</u>	RESS)	West Palm Beach, Fl	33417			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u> </u>	1040 Cameo Circle			T APK	<u>,</u>
		West Palm Beach, Fl	33417		TARY ANSIGN	ر م
D. If amending the registered agent and/or register new registered agent and/or the new registered of New Registered Agent:	ed office a office addr	'ess:	nter the name o	f the	F LONIOA	2:41:
_	1040 Camer	o Circle			M	***
New Registered Office Address:		(Flor	ida street address)			
	West P	alm Beach	Flo	rida	33417	
	(	City)		Zip Code		
ew Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.			e obligations of	the posi	tion.	
	All	7 20				
	Signa	ture of New Register	ed Agent, if char	ging		

Page 1 of 4

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	$\overline{\underline{v}}$ $\overline{\underline{M}}$	hn Doe ike Jones Illy Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	D	Louis, Elton	1040 Cameo Drive
XX Add			West Palm Beach, FL 33417
Remove			
2) Change	D	Stubbs, Gaybriel	109 Churchill Circle
XX Add			Royal Palm Beach, FL 33414
Remove 3) Change	D	Knowles, Dohn	4222 Invertay Blvd
XX Add			Lauderhill, FL 33319
Remove			
4)Change	D	Stubbs, Valencia Y	109 Churchill Circle
Add			Royal Palm Beach, FL 33414
XX Remove			
5) Change	D	Gallon, Archie	109 Churchill Circle
Add			Royal Palm Beach, FL 33414
Remove			
6) Change	D	Stubbs, Stephen A	109 Churchill Circle
Add			Royal Palm Beach, FL 33414
XX Remove	•		

If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
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			· · · · · · · · · · · · · · · · · · ·			

	e date of each amendment(s) adoptic this document was signed.	4/13/2017 On:	, if other than the
Eff	ective date if applicable:	4/13/2017	
		(no more than 90 days after amendment file date)	•
	e: If the date inserted in this block do ument's effective date on the Departm	es not meet the applicable statutory filing requirements, this date tent of State's records.	will not be listed as the
Ada	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendmen	ut(s)
X	There are no members or members e adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/wer	ė ,
	Dated 4/13/201	7	
	Signature 4	7	
	have not been sel	or vice chairman of the board, president or other officer-if director ected, by an incorporator – if in the hands of a receiver, trustee, of intentional fiduciary by that fiduciary)	
		E Louis	
		(Typed or printed name of person signing)	
	-	Director	<b>*</b>
		(Title of person signing)	