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COVER LETTER

TO: Amendment Section Division of Corporations

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Trinity Pentecosts NAME OF CORPORATION:	al Tabernacle
N99000007673	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Pastor Stephen Pettijohn Jr	
	(Name of Contact Person)
Trinity Pentecostal Tabernacle	
	(Firm/ Company)
5279 Hwy 77	
	(Address)
Chipley, FL 32428	
	(City/ State and Zip Code)
office@trinitypt.org	
E-mail address; (to be i	used for future annual report notification)
For further information concerning this matter, ple	rase call:
Pastor Stephen Pettijohn Jr	850 773-5777
(Name of Contact Per	
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:
S35 Filing Fee	tus Certified Copy (Additional copy is enclosed) S52.50 Filing Fee

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 32304

Articles of Amendment to Articles of Incorporation of

Trimity Pentecostal Tabernacie IIIC.		
<u>-</u>	ly filed with the Florida Dept. of State)	
N'99000007673		
(Document Numbe	r of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statutes amendment(s) to its Articles of Incorporation:	, this Florida Not For Profit Corporation adopts the following	
A. If amending name, enter the new name of the corporation	on:	
	71	
name must be distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name.	The new on "incorporated" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable:	59. 9	
(Mailing address MAY BE A POST OFFICE BOX)		
	<u> </u>	1
	1.0	_
	/	
D. If amending the registered agent and/or registered office	anddress in Florida enter the name of the	
new registered agent and/or the new registered office ac		
	_	
Name of New Registered Agent:		
	(Florida street address)	
New Registered Office Address:		
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered		
I hereby accept the appointment as registered agent. I fim fan	unar with and accept the obugations of the position.	
	gnature of New Registered 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)

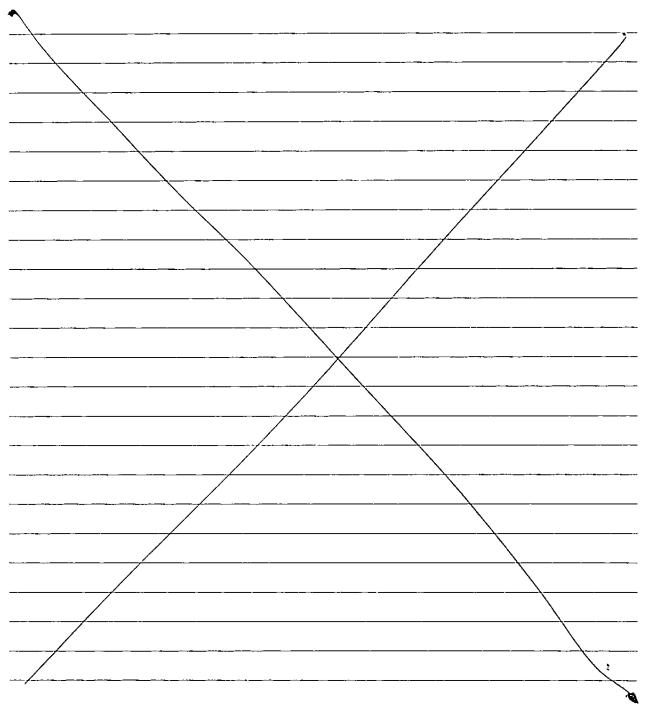
Please note the officer/director title by the first letter of the office title:

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>V</u> <u>Mik</u>	n <u>Doe</u> se Jones y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	pastor	Michael McFatter	3359 Antler trail
Add Remove			Chipley, FI. 32428
2) Change	Pastor	Stephen Pettijohn Jr	4398 Janet Cir
X_ Add			Chipley, FL 32428
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		***************************************	
Add			~
Remove			
6) Change			
Add			
Remove			

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



Page 3 of 4

The date of each ame	ndment(s) adoj	otion:		, if other than the
late this document was				
Effective date <u>if appli</u>	cable:		18	
		(no more than 90 d	ays after amendment file date)	
<u>Note:</u> If the date inser- locument's effective d	ted in this block ate on the Depa	does not meet the appli rtment of State's records	icable statutory filing requirements s.	s, this date will not be listed as the
Adoption of Amendm	ent(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s was/were sufficien		pted by the members and	d the number of votes east for the	amendment(s)
There are no men adopted by the be			amendment(s). The amendment(s) was/were
Dated	11/27/2018			
Pated				
Signature				
	have not been	selected, by an incorpo	he board, president or other office rator – if in the hands of a receive	r-if directors r, trustee, or
	other court ap	pointed fiduciary by tha	it fiduciary)	
	Pastor Step	ohen Pettijohn		
		(Typed or	printed name of person signing)	
	Registered	Agent/Pastor		
		······································	(Title of person signing)	