N9900000 2845

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COVER LETTER

TO: Amendment Section Division of Corporations MORPH DANCE THEATRE, INC. NAME OF CORPORATION: N99000002845 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LARRY K HOOPER (Name of Contact Person) HOOPER FINANCIAL SERVICES (Firm/ Company) 1207 S WASHINGTON AVENUE (Address) MARSHALL, TX 75670 (City/ State and Zip Code) larry@hooperfinancial.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 935-9911 LARRY K HOOPER 903 (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & **≣\$52.50** Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy is enclosed) Enclosed)

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

MORPH DANCE THEATRE, INC.

(Name of Corporation as currently filed with the N99000002845	Finitia Dept. of State			
	ent Number of Corporation (if known)			_
(1)Octime	ent Number of Corporation (1) known)			
Pursuant to the provisions of section 617,1006, Flori amendment(s) to its Articles of Incorporation:	da Statutes, this Florida Not For Profit Corpor	ration adopts th	e follow	ring
A. If amending name, enter the new name of the	corporation:			
HEALING GRACE COMMUNITY INC			The n	tere.
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.		viation "Corp."		
B. Enter new principal office address, if applicab (Principal office address MUST BE A STREET AL				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>OX</u>)			
			_	
D. If amending the registered agent and/or regist	ered office address in Florida, enter the nan	se of the		
new registered agent and/or the new registere				
Name of New Registered Agent:		<u> </u>	202	
			30	escr 4
New Registered Office Address:	(Florida street addres	。	27	1 T TO
		Florida (1)	220	
_	(City)	(Zip Code))	Ģ	
New Registered Agent's Signature, if changing Relatively accept the appointment as registered agent.	egistered Agent: I am familiar with and accept the obligations	of the position	:3	
	Signature of New Registered Agent, if c	hanging		
	menutare to be necessaried by the time and the contraction of the cont	(114() E 4/1 E		

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 D Mike J Sally S	ones		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s	
1) Change Add					
Remove					
2) Change Add		_			
Remove 3) Remove					
4) Change Add		_		2974 DEI	e (2)
Remove				ري استأسار	ه مده چامه ۱۲۶۶
5) Change Add		_	-	72 7 52 55	
Remove				<u>ာ</u> က် မှာ	~ .
6) Change Add		_	-	7,5	
Remove				4-7-1-7-1-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-	
E. If amending or addi (attach additional she	ng additi ets, if nec	onal Art	ticles, enter change(s) here: (Be specific)		

		
		
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		[마틴 <u>프</u>
		· ·· · · · · · · · · · · · · · · · · ·
The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:		
mappineasie.	(no more than 90 days after amendment	file date)
	k does not meet the applicable statutory filing	g requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of vote I.	es cast for the amendment(s)

adopted b	by the board of directors.
r	Dated DECEMBER 19, 2024
S	Signature Langt Avy
	(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)
	LARRY K HOOPER
	(Typed or printed name of person signing)
	ASSISTANT TREASURER

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

SECRETARY OF SECTO