## 706499

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	st College of Florida, Inc			
706499 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and f	ee are submitted for filing	g.		<del></del>
Please return all correspondence concerning	g this matter to the follow	ing:		
Dr. Clayton Cloer				
	(Name of Con	itact Perso	n)	
Baptist University of Florida, Inc.				
	(Firm/ Co	mpany)		<u> </u>
5400 College Dr.				
	(Addr	ess)		
Graceville, FL 32440				
	(City/ State an	d Zip Cod	e)	
mlburrell@baptistcollege.edu				
E-mail address: (	to be used for future ann	ual report	notificatio	n)
For further information concerning this mat	ter, please call:			
Dr. Clayton Cloer		850	)	263-3261
(Name of Conta	act Person)	at (Ar	ea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount	it made payable to the Fl	orida Depa	irtment of	State:
■ \$35 Filing Fee □\$43.75 Filin Certificate of		ру	Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is used)
Mailing Address Amendment Section			Address	
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Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FI. 32314 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

FILED

The Baptist College of Florida, Inc. 2023 NOV 14 PM 2: 57 (Name of Corporation as currently filed with the Florida Dept. of State) 706499 (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: A. If amending name, enter the new name of the corporation: Baptist University of Florida, Inc. name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: , Florida (Citv) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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	PT John Do Y Mike Jo SV Sally Si	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 ) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove		_	
E. If amending or adding (attach additional sheet)	additional Artics, if necessary).	cles, enter change(s) here: (Be specific)	
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The date of each amendment(s) adoptidate this document was signed.	on:	_, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block dedocument's effective date on the Departr	oes not meet the applicable statutory filing requirements, this date will not be ment of State's records.	oe listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	

П	There are no members or members enti- adopted by the board of directors.	tled to vote on the amendment(s). The amendment(s) was/were
	Dated 11/14/23	·
	Signature Clayton	Cloc
	have not been select	vice chairman of the board, president or other officer-if directors ed. by an incorporator – if in the hands of a receiver, trustee, or d fiduciary by that fiduciary)
	Clatyon P. Cloer	
		(Typed or printed name of person signing)
	President, Baptist	University of Florida, Inc.
	<del></del>	(Title of person signing)