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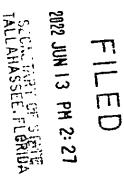
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COVER LETTER

TO: Amendment Section Division of Corporations

Christ Chure NAME OF CORPORATION:	ch Unity of Orlando	o, Florida			
715176		• • • • • • • • • • • • • • • • • • • •			
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee	e are submitted for t	filing.			
Please return all correspondence concerning	this matter to the fo	llowing:			
Rev. Margaret Alderman					
	(Name of	Contact Person)		
Christ Church Unity of Orlando, Florida					
	(Firm	/ Company)			
771 Holden Ave					
	(/	Address)	,		
Orlando, F1, 32839					
	(City/ Stat	e and Zip Code)		•
revmaggie@christchurchunity.net					
E-mail address; (to	o be used for future	annual report n	otification)	-
For further information concerning this matte	er, please call:				
Rev. Margaret Alderman		407 at		8523940	
(Name of Contac	et Person)		a Code)	(Daytime Telephone No	imber)
Enclosed is a check for the following amount	i made payable to th	ne Florida Depa	rtment of :	State:	
□ \$35 Filing Fee □\$43.75 Filing Certificate of	Status Certified	d Copy onal copy is	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address		Street A	Address		

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 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

Christ Church Unity of Orlando, Florida					
(Name of Corporation as currently filed with the	Florida D	ept. of State)			
715176					
(Docum	ent Numbe	er of Corporation (if k	nown)		
Pursuant to the provisions of section 617,1006, Flor amendment(s) to its Articles of Incorporation:	ida Statute	s, this <i>Florida Not Fe</i>	or Profit Corporation	adopts the	e following
A. If amending name, enter the new name of the	corporati	on:			
Unity of Central Florida, Inc					The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	"corporat	ion" or "incorporate	d" or the abbreviation	n "Corp."	
B. Enter new principal office address, if applical	hla:		-	540	202
(Principal office address MUST BE A STREET A					ا ي
				<u> </u>	Z =
				SS	-ω 1
			·	inc.	- 골!
C. Enter new mailing address, if applicable:	DZ1125			77.	PH 2:
(Mailing address MAY BE A POST OFFICE)	<u>80x</u>)			9	्र इ
				ಕ್ಷಾ ಕ್ಷಾ	
					
D. If amending the registered agent and/or regis	tered offic	e address in Flor <u>ida</u>	, enter the name of t	<u>he</u>	
new registered agent and/or the new registered	ed office <u>a</u>	ddress:			
Name of New Registered Agent:	Margaret a	Alderman			
mane by the region of the	771 Holde	n Ave			
			Torida street addressi		
New Registered Office Address:			ioriau sireer uauressr		
	Orlando			32839	
		(City)	, Flori 	da n <i>Code)</i>	
		(< 12,1)	(1.4)	., ((,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
New Registered Agent's Signature, if changing B	Registered	Agent:			
I hereby accept the appointment as registered agen	t. Lam fan 1	niliar yrith,imd accep	t the obligations of th	e position.	
	1	11////			
	-///	W			
	\sim \sim Si_{ℓ}	gnattire of New Regis	tered Agent, if changi	ng	

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 De Mike Jo Sally Si	ones		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s	
1) Change Add	<u> </u>				
Remove					
2) Change Add		_			
Remove 3)Remove Add Remove		_		TALL AHA	71
4) Change Add		_			
Remove				PA 2:	O
5) Change Add		-		2: 27 07:19A	
Remove					
6) Change Add		-			
Remove					
E. If amending or addin (attoch additional shee	e additic	ona <u>l Arti</u> essary).	cles, enter change(s) here: (Be specific)		
					

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The date of each amendment(s) adoption date this document was signed.	ı:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Departme	s not meet the applicable statutory filing requirements, this date vint of State's records.	vill not be listed as the
Adoption 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 amendment	(s)

here are no members or members entitled to vote on the amendment(s). The amendment(s) was/were lopted by the board of directors.
Dated 6 8 22
Signature Rev. Manain allabora
(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)
Rev. Margaret Alderman
(Typed or printed name of person signing)
Sr. Minister and Spiritual Leader
(Title of person signing)

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FILED
2022 JUN 13 PM 2: 27
TALLAHASSEE. FLORIBA