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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	NORTHWOODS BA	APTIST CHURCH OF	FALLAHAS ———————————————————————————————————	SEE INC
DOCUMENT NUMBER:	718385			
The enclosed Articles of Am	endment and fee are sub-	mitted for filing.		
Please return all corresponde	ence concerning this matte	er to the following:		
SUSANNE SPELL				
		(Name of Contact Person	on)	
NORTHWOODS BAPTIST	CHURCH OF TALLAI	IASSEE INC		
		(Firm/ Company)		
P O BOX 180430				
		(Address)		
TALLAHASSEE FL 32303				
82 BV 1	 ·	(City/ State and Zip Co	de)	-
FINANCE@NWCTALLY.	COM			
E	-mail address: (to be used	Tor future annual repor	t notification	1)
For further information cone	erning this matter, please	call:		
SUSANNE SPELL		at		562-1188
	(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the I	ollowing amount made pa	yable to the Florida De	partment of	State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	-	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing A	ddress nt Section		t Address	
	nt Section f Corporations		ioment Secti ion of Corpe	
P.O. Box (-		Centre of T	
	e. FL 32314			: Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

NORTHWOODS	BAPTIST	CHURCH	OF TAI	JEAHAS	SEE IN	C

2025 MAY 15 10 AM 14 27 (Name of Corporation as currently filed with the Florida Dept. of State) 718385

(Docur	nent Numbe	er of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Flo amendment(s) to its Articles of Incorporation:	orida Statute	es, this <i>Florida Not For Prof</i>	't Corporation adopts the following
A. If amending name, enter the new name of th	e corporati	ion:	
N/A			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		ion" or "incorporated" or th	
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A		N/A	
Trincipal office data case in the second sec	(DDAL),	·	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)	N/A	
D. If amending the registered agent and/or reginew registered agent and/or the new register			the name of the
Name of New Registered Agent:	JIM BUR	ROUGHS	
	1912 SAE	DDLE BROOK DRIVE	
New Registered Office Address:		(Florida su	vet address)
	TALLAH	ASSEE	, Florida 32303
		(City)	(Zip Code)
New Registered Agent's Signature, if changing J hereby accept the appointment as registered agen			ligations of the position.
_	Sig	gnature of New Registered A	gent, 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 hold. 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 D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	TR	ROB LONGSHORE	5713 MOSSY TOP WAY TALLAHASSEE FL 32303
K Remove			
2) Change Add	TR	JAY BOSTWICK	2102 GREAT OAK DRIVE TALLAHASSEE FL 32303
Remove 3) Remove	TR	ЛМ BURROUGHS	1912 SADDLEBROOK DRIVE TALLAHASSEE FL 32303
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
(attach additional she		ticles, enter change(s) here: (Be specific)	
N/A			
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		201		
				
				
The date of each amendment(s) adoption: _date this document was signed.	N/A			, if other than the
Effective date if applicable:				
(no	more than 90 days	after amendment file	edate)	
<u>Note:</u> If the date inserted in this block does r document's effective date on the Department	of meet the applicat	ole statutory filing re	quirements, this date will	not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

	04/21/2025
Dated	
Signature_	Jan Durous
	By the chairman of fice 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)
	JIM BURROUGHS
	JIM BURROUGHS (Typed or printed name of person signing)
	· · · · · · · · · · · · · · · · · · ·