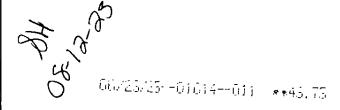
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## COVER LETTER

TO: Amendment Section
Division of Corporations

Amendment Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION: The Mission Anglican Church, Inc
DOCUMENT NUMBER: N 0000005612
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rev. Lisa M. Browning (Name of Contact Person)
The Mission Anglican Church Wirm/Company)
319 E. Jackson St. (Address)
Pensacola FL 32501 (City/State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rev. Lisa Browning at 0,50 - 433-0420 (Name of Contact Rerson) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status  Certificate of Status  Certificate of Status  Certificate of Status  (Additional copy is enclosed)  Certificate of Status  (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

## Articles of Amendment to

Articles of Incorporation of	FILED
The Mission Anglican Church The 202 (Name of Corporation as currently filed with the Florida Dept. of State)	FILED 25 JULY 23 AM 10: 54
N - 0000000 5612	HIT 10: 54
(Document Number of Corporation (if known)	1 4385E, FUE
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> a amendment(s) to its Articles of Incorporation:	dopts the following
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Company" or "Co." may not be used in the name.	"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:	
(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	<del></del>
new registered agent and/or the new registered office address:	•
Name of New Registered Agent: Rev. Daniel M. HIXDY	)
319 E. Jackson St (Florida street address)	
New Registered Office Address:	
Pensacola Florida	32501 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 p	oosition.
Signature of New Registered Agent, if changing	
Signature of New Registered Agent, if changing	k

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 D V Mike J SV Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add	P	Rev. Daniel Hixon	5176 Rowe Tr. Pace FL 32571
Remove 2) Change Add	<u>P</u> _	Rorald E. Browning	5330 Wesleyan) Pace FL 32571
Remove 3 ) Change Add			
## Remove  ### Add  ### Remove			
5) Change Add Remove			
6) Change Add Remove			
<del></del>			·

If amending or adding additional Arattach additional sheets, if necessary).	(Be specific)				
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The date of each amendment(s) adoption: JUN 2015 date this document was signed.	, if other than the
Effective date if applicable: 15 June 2025  (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.  There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	B. T. T.
Dated 17 June 2025 Signature Dal Ditt	
(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. Daniel M. Hixon (Typed or printed name of person signing)	
President (Title of person signing)	