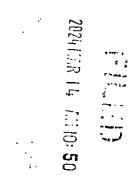


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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: FRIENDS hip HoliNESS Community Church Incorporation
DOCUMENT NUMBER: 1000007786
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Linda Mobley (Name of Contact Person)
(Name of Contact Person)
(Firm/ Company)
766 Melson Ave (Address)
SACKSOMVIlle, Florida 32254 (City/ State and Zip Code)
MZLICI 53 @ GMail. Cond E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
LINIDA Mobley (Name of Contact Person) at 904-844-1(13) (Area Code) (Daytime Telephone Number)
(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 Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) □ \$43.75 Filing Fee & □ \$52.50 Filing Fee & Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassec

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to
Articles of Incorporation

of Fig.
FRIENDShip Holinies Community Church Theorpeation
(Name of Corporation as currently filed with the Florida Dept. of State)
N 0000000 7786
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
TRUST IN The LORD Church Of God IN Christien The name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "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 <u>MUST BE A STREET ADDRESS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A
(Maning duaress MAT 812 / T 1001 VI T 102 10015)
·
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: WilfaEd Habersham 1333 Columbus Avenue
1333 Columbus Avenue
(Florida street address)
New Registered Office Address:
Sacksonville Florida 32254 (City) (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.
Thereny accept the apparatument as registered agent. I am jugation that and accept the imagentation of the paratument
With HOW -
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 A Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	PAS	Willie L. Gilbert	8155 Tea TICKEHDr. SACKSON VILLE F1 3224
_ <u>X</u> Remove			
2) Change Add	Pas	Wilfred Habersha	M 3313 Columbus Ave JACKSONVIlle, Fl. 32254
Remove Change Add . Remove	T	Marcus Peck	7840 Jeff Dr. SECKSONVILLE, FL. 32244
4) Change Add	工	Mary Habersham	33/3 Columbus Ave Juersonville, Fl. 32254
Remove 5) Change Add	See Retary	Linda Mobley	8642 Mahonia Dr. Jax, Florida 32241
Remove			
6) Change Add			
Remove			
E. If amending or additional sho		ticles, enter change(s) here: (Be specific)	
.	14 		

						
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The date of each amendment(s) adop late this document was signed.	tion:	, .				, if other than
	May	30. 20	1261			
meenie date ii appiieanie.	(no more than	1 90 days after	r amendment fil	e date)		

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)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 03 106 2024 Signature Wird 146
(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)
Wilfred Habersham (Typed or printed name of person signing)
Pastor
(Title of person signing)