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COVER LETTER

TO: Amendment Section Division of Corporations	*
NAME OF CORPORATION: The New Church Without Walls	International.
DOCUMENT NUMBER: NO20001578	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Douglas Alexander St. (Name of Contact Person)	
The New Church Without Walls International	Inc.
P. O. Box 367	
(Address)	
Hernando FL 34441	<u>-</u>
(City/ State and Zip Code)	
The new CNOW & Gmail. Com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call: Dogias Alexander St. at (352) 344-24 (Name of Contact Person) (Daytime Telepho	425
(Name of Contact Person) (Area Code) (Daytime Telepho	one Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:	. 72
S35 Filing Fee S43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certified Copy (Additional Copy is Enclosed)	F1 1:38
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

A	Articles of In	-	n		
The New Church Without	Walls	Intel	rnation	ral Inc.	
(Name of Corporation as currently filed with the Flo	orida Dept. o	of State)	_		
N02000001578					
(Document	Number of C	Corporation	(if known)		
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this	s Florida Ne	ot For Profit	Corporation adopts t	he following
A. If amending name, enter the new name of the co	rporation:				
					The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable:		or "incorpo	rated" or the	abbreviation "Corp.	" or "Inc."
(Principal office address MUST BE A STREET ADD	RESS)	· · · · · · · · · · · · · · · · · · ·			
					
				<u></u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>x</u>)				
D. If amending the registered agent and/or register- new registered agent and/or the new registered of	ed office add office addres	dress in Flo	rida, enter t	he name of the	
Name of New Registered Agent:					
					وه ۱۱ <u></u>
New Registered Office Address:			(Florida stre	et address)	ر. :
				, Florida	-
_	(Ci	ity)	_	(Zip Code)	- :
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.	istered Agen I am familiar	i <mark>t:</mark> with and ac	ecept the obli	gations of the position	,7,
	Signatui	re of New R	egistered Ag	ent, if changing	

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be not Mike Jones, V as Remove, and Sally Smith, SV as an Add. Example: X Change Y Mike Jones X Add SV Sally Smith Type of Action (Check One) Change Add Remove Change Add Change Add Change Add Change Add Change Add Change Add	ing removed and title, name, hairman or Clerk: CEO = Chief list the first letter of each office
X Change X Remove X Remove Y Mike Jones X Add SV Sally Smith Type of Action (Check One) Title Name Address Address SONNY Wight Remove Change Add Remove Change Add Remove Change Add Change Add Remove Change Add Change	e Jones is listed as the V. There t ed as John Doe, PT as a Change
Check One TR Sonny Wright	
2) Change	
	367 Hernando FL 34441
Remove	
4) Change	
Remove	
5) Change	
Remove	
6) Change	3
Remove	
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	

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The date of each amendmential suggitting.	f other than the
late this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(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 be listed as the document's effective date on the Department of State's records.

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.		
Dated $\frac{9/8/2023}{1}$		
Signature		
(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)		
Douglas Alexander St.		
(Typed or printed name of person signing)		
VP		

(Title of person signing)

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