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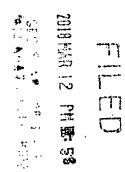
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Amend

MAR 1 3 2018

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION:	FREEDOM BAPTIST	CHURCH OF KE	EYSTONE HE	IGHTS, INC.
N020	000002664			
The enclosed Articles of Amenda	nent and fee are submi	tted for filing.		
Please return all correspondence of	oncerning this matter	to the following:		
BOBBY C KOINER				
	(1	Name of Contact Pe	erson)	
FREEDOM BAPTIST CHURC	H OF KEYSTONE H	EIGHTS, INC.		
		(Firm/ Company	')	
PO BOX 1517				
		(Address)		
KEYSTONE HEIGHTS FL 326	56			
	(0	City/ State and Zip (Code)	
admin@freedomkeystone.com				
E-mail	address: (to be used for	or future annual rep	ort notification	
For further information concerning	g this matter, please ca	ıll:		
BOBBY C KOINER		at	352	473-2778
(Nan	ne of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follow	ing amount made paya	able to the Florida I	Department of S	state:
	43.75 Filing Fee & Certificate of Status	1843.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi S Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FREEDOM BAPTIST CHURCH OF KEYSTONE HEIGHTS, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N02000002664 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: 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 "Corp." or "Inc." "Company" or "Co." may not be used in the name. 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 new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address. , Florida (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.

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 X. Add	<u>V</u> <u>M</u>	hn Doe ike Jones illy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	ADAMS, MALCOLM F	7494 PARADISE DR.
Add X Remove			KEYSTONE HEIGHTS FL 32656
2) Change	D	HERSEY, DEWITT	7372 SE 11 TH AVE.
Add			STARKE FL 32091
Remove 3) Change	CTR	STANLEY, BRYAN	130 S JASMINE AVE
X Add Remove			MELROSE FL 32666
4) Change	TR	CRAVEY, JOHN M	6682 COUNTY RD 214
X Add			KEYSTONE HEIGHTS FL 32656
Remove 5) Change	TR	DENNEY, MICHAEL	123 WOODLAND ACRES CT
X Add Remove			INTERLACHEN FL 32148
6) Change Add			
Remove		P A	

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The	date of each amendme	ent(s) adoption:	, if other than th
date	this document was sign	ed.	
Effe	ective date <u>if applicable</u>	:	
		(no more than 90 days after amendment file date)	
		this block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.	ot be listed as the
Add	option of Amendment(s	(<u>CHECK ONE</u>)	
	The amendment(s) was was/were sufficient for	/were adopted by the members and the number of votes cast for the amendment(s) approval.	
	There are no members adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were f directors.	
	Dated	ARCH 7, 2018	
		the chairman or vice chairman of the board, president or other officer-if directors e not been selected, by an incorporator – if in the hands of a receiver, trustee, or	
		er court appointed fiduciary by that fiduciary)	
	1	BRYAN STANLEY	
	-	(Typed or printed name of person signing)	
	(CHAIRMAN, BOARD OF TRUSTEES	
	_	(Title of person signing)	