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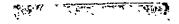
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CHRIST FELLOWSHIP OF N.E. FLORIDA, INC.					
DOCUMENT NUMBER: NO 7 0 0 0 0 0 2 8 2 0					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
San Sansi					
STAN STOREY (Name of Contact Person)					
CHAIS- FELLOWSLID OF N.E. FORIDA, INC. (Firm/Company)					
P.O. Box 1478 (Address)					
(Address)					
VULEE, FL 32041 (City/State and Zip Code)					
(City/ State and Zip Code)					
SLS TOREY@ COMCAST, NET E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
STAN STOREY at 904-610-7242 (Name of Contact Person) (Area Code) (Daytime Telephone Number)					
(Name of Contact Person) (Area Code) (Daytine Telephone Number)					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center Circle Tallahassee, Fl. 32301					

Articles of Amendment to Articles of Incorporation of

(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: The new man 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) 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: New Registered Agent: (City) (City) (City) (City) (City) (Code) New Registered Agent: (Plorida Street address) (City) (Cit	CHRIST FELLOWS HIP OF N. E. FLORIDA, THE. (Name of Corporation as currently filed with the Florida Dept. of State)
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Signature of New Resistered Agent if changing	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 Recretared Agent if changing	
Digitaliste of their neglistered agent, if changing	Signature of New Registered Agent, if changing

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2019 # 21 日 39

SECRETARY OF STAFE TALLAHASSEE, FLORIDA 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.

X Change X Remove X Add	PT John Doe Y Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change Add	TD RUSSELL D. CHUNN	96277 GLENWOOD ROAD YMEE, FL 32097
Remove 2) Change Add	TD ERIC EPPLEY	97077 CHESTER RIVER ROAD
Remove 3) Change Add		
Remove 4) Change Add Remove		
5) Change Add Remove		
6) Change Add		

ach additional sheets, if necessary).	eles, enter change(s) here: (Be specific)		
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The date of each amendment(s) adoption: JUNE 22, 2019 date this document was signed.	, if other than the
Effective date if applicable: JULY 1, 2019	· · · · · · · · · · · · · · · · · · ·
(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not 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 amen was/were sufficient for approval.	dment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was adopted by the board of directors.	s/were
Dated 8/19/2019	
Signature Stanley X. Stary, Paes, Den (By the chairman of vice chairman of the board, president or other officer-if d	irectors
have not been selected, by an incorporator - if in the hands of a receiver, trus other court appointed fiduciary by that fiduciary)	tee, or
STANLEY L STOREY	 _
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	