## N080000066435

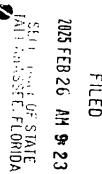
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	Mentoring With Pu ON:	rpose Charity Inc		
	N08000006625			
DOCUMENT NUMBER:				
The enclosed Articles of Art	nendment and fee are sub	omitted for filing.		
Please return all correspond	ence concerning this mat	ter to the following:		
Frank Murphy				
		(Name of Contact P	erson)	
Mentoring With Purpose C	harity Inc			
		(Firm/ Compan	y)	
3823 Felton Hill Road SW				
	· · · · · · · · · · · · · · · · · · ·	(Address)		
Smyrna, GA 30082				
		(City/ State and Zip	Code)	
l frankmurphy@gmail.com				
I	E-mail address: (to be use	d for future annual re	port notificatio	n)
For further information con-	cerning this matter, please	e call:		
Frank Murphy		ង	813	965-1472
	(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the	following amount made p	ayable to the Florida	Department of	State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing /	Address	<u>St</u>	reet Address	

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

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## רבנ

## Articles of Amendment to Articles of Incorporation of

Mentoring With Purpose Charity Inc		
Name of Corporation as currently filed with the Flor	ida Dept. of State)	
N08000006625		
(Document N	umber of Corporation (i	f known)
Pursuant to the provisions of section 617,1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this Florida Not	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
Churches, Communities, and Schools Plan Legacy Institu	ate Inc	The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorpore	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRI</u>	ESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	2025 FEB
		26 AM SSEIL F
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		da, enter the name of the CORIDA
Name of New Registered Agent:		
New Registered Office Address:		(Florida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I as		ept the obligations of the position.
	Signature of New Rey	sistered 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	PT         John I           V         Mike           SV         Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add		<del></del>	
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add		<del></del>	
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	g additional Ar ts. if necessary).	rticles, enter change(s) here: (Be specific)	
<u></u>	·. ·		

,		
		<del></del>
		<del> </del>
		<del></del>
	<u> </u>	
The date of each amendment(s) adopted date this document was signed.	on:	, if other than the
and this avenifent was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block do document's effective date on the Department.	ses not meet the applicable statutory filing requirements, this date will not be nent of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
П ты	dheatha acardona and the market of the control of t	
The amendment(s) was/were adopte was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	

opted by the bo	pard of directors.
	2/18/25
Dated	
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)
	Frank Murphy
	(Typed or printed name of person signing)
	President
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were