N13000006498

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100403673191

03/02/23--01018--016 **52.50

NK amend



A. RAMSEY MAY 1 & 2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT		VAY BAPTIST UNIV	VERSITY, INC	
DOCUMENT NUMBER:	:	N13000006498		
The enclosed Articles of A	mendment and fee are sul	bmitted for filing.		
Please return all correspond	dence concerning this mat	ter to the following:		
		JAMES J. MIN		
		(Name of Contact P	'erson)	
	PR	OTAXING LLC DB.	А Ј СРА	
		(Firm/ Compan	y)	
	1295 OLD	PEACHTREE RD N	W SUITE 260	
		(Address)		
	:	SUWANEE, GA 300	24-2770	
		(City/ State and Zip	Code)	
	j	AMES@PROTAXIN	G.COM	
	-mail address: (to be use	d for future annual re	port notificatio	n)
For further information con	cerning this matter, pleas	e call:		
	JAMES J. MIN	at	678	245 - 9667
	(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 i enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing A	Address	<u>Str</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

Articles of Amendment

FILED

Articles of Incorporation of

2023 MAR -2 PM 12 20

LIFEWAY BAPTIST UNIVERSITY, INC.

	N13000006498	.c./1/9/////
(Document No	umber of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation adop	ots the following
A. If amending name, enter the new name of the corpo	oration:	
LIFEWAY T	HEOLOGICAL UNIVERSITY, INC	The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "Ca	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRE	(22:	
		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
		
). If amending the registered agent and/or registered		
new registered agent and/or the new registered office	ce address:	
N/A Name of New Registered Agent:		
	(Florida street address)	
New Registered Office Address:		
	, Florida, (City) , (Zip Code	
	(City) (Zip Code	e)
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I am		tion.
	, ,	
·	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	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) N/A Change Add			
Remove			
2) Change Add		*****	
Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add	-21-17		
Remove			
E. If amending or addin (attach additional sheet		nal Articles, enter change(s) here: ssary). (Be specific)	
N/A			

N/A			
		-	
		<u> </u>	
		- "	
			
			
		<u></u>	
-			
The date of each amendment(s) a date this document was signed.	doption:		, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after am		<u> </u>
	(no more than 90 days after am	endment file date)	
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statute partment of State's records.	ory filing requirements, this date wi	II not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the numbe	r of votes east for the amendment(s)

	$\frac{2-12-23}{0}$
Signatu	Shot DIA
-	(By the chafrman of vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	PASTOR JONG O, LEE
	PASTOR JONG O. LEE (Typed or printed name of person signing)

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