

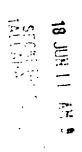
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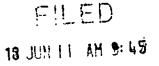
TO: Amendment Section
Division of Corporations

Port St. I NAME OF CORPORATION:	Lucie Christian Aca	ademy, Inc.			
N1400000739	92				
DOCUMENT NUMBER:	-				
The enclosed Articles of Amendment and f	ee are submitted for	filing.			
Please return all correspondence concerning	g this matter to the fo	ollowing:			
ANDRIA DIXON					
	(Name of	f Contact Person)			
WORD OF FAITH CHRISTIAN ACAE	DEMY, INC.				
	(Firm	n/ Company)		•	
1602 SW MERCHANT LANE					
	(,	Address)			
PORT ST. LUCIE, FL 34953					
	(City/ Sta	ite and Zip Code)			
wordoffaithpsl68@gmail.com					
E-mail address: ((to be used for future	annual report no	ification	n)	
For further information concerning this mat	ter, please call;				
ANDRIA DIXON		772 at		204-3253	
(Name of Cont	act Person)		Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amount	nt made payable to tl	he Florida Departi	nent of S	State:	
□ \$35 Filing Fee □\$43.75 Fili Certificate		ed Copy onal copy is	Certifi Certifi	O Filing Fee icate of Status ied Copy ional Copy is ised)	
Mailing Address		Street Ac	ldress		

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

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

Articles of Amendment to Articles of Incorporation



PORT ST. LUCIE CHRISTIAN ACADEMY, INC.

<u> </u>		<u> </u>
(Name of Corporation as curren	tly filed with the F	lorida Dept. of State)
N14000007392		
(Document Numb	er of Corporation (i	known)
Pursuant to the provisions of section 617.1006, Florida Statute imendment(s) to its Articles of Incorporation:	es, this <i>Florida Not</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	
WORD OF FAITH CHRISTIAN ACADEMY, INCORPOR	ATED	The new
name must be distinguishable and contain the word "corpora" "Company" or "Co." may not be used in the name.	tion" or "incorpora	
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		a, enter the name of the
new registered agent and/or the new registered office a	ddress:	
Name of New Registered Agent:		
New Registered Office Address:	<u> </u>	tFlorida street address)
		F1 .:
	(City)	Florida (Zip Code)
	Conist	(rap conc)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fair	Agent: niliar with and acce	pt the obligations of the position.
	ignature of None Dec	istered Avent it chanving
O)	хнашт от густ кеч	ометса мусті, и спапуну

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 Doc 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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add Remove			
2) Change			
Add Remove			
3) Change Add			
Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			

attach additional sheets, if necessary).	(Be specific)	<u>te(s) here</u> :			
			·		
					<u>-</u> -
 	 				
					
					
					
					-
		<u>-</u>			
		-		_	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
іло то	re than 90 days after amendment file date)
Note: If the date inserted in this block does not make the document's effective date on the Department of St	eet the applicable statutory filing requirements, this date will not be listed as the ate's records.
Adoption of Amendment(s) (CHE	CK ONE)
The amendment(s) was/were adopted by the was/were sufficient for approval.	nembers and the number of votes cast for the amendment(s)
There are no members or members entitled to adopted by the board of directors.	vote on the amendment(s). The amendment(s) was/were
June 7, 2018 Dated	
Signature	
	nairman of the board, president or other officer-if directors an incorporator – if in the hands of a receiver, trustee, or ciary by that fiduciary)
ANDRIA DIXON	
-	(Typed or printed name of person signing)
PRESIDENT	
	(Title of person signing)