N1400	6887000
(Requestor's Name) (Address) (Address)	900390196189
(City/State/Zip/Phone #)	07/05/1220)DC)005+03C,00
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	RECEIVED 2022 JUL - 1 PH 2:46 DIVISION TALLATINGTE, FLORIDA
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

*

CHRISTIAN CHURCH RAINS OF

GRACE INC

Signature		<u> </u>
Requested by: SETH		
Name	Date	Time
Walk-In	Will Pick U	Jp

	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
<u> </u>	Рного Сору
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
<u></u>	Fictitious Owner Search
	Vehicle Search
,	Driving Record
	UCC 1 or 3 File
	UCC 11 Search
	UCC 11 Retrieval

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COVER LETTER

TO: Amendment Section Division of Corporations			
CHRISTIAN CHURCH	RAINS OF GRA	ACE INC.	
N14000007882 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitte	ed for filing.		
Please return all correspondence concerning this matter to	the following:		
WANDY FIGUEROA			
(N:	nme of Contact Pe	erson)	
FIGCO ACCOUNTING FIRM			
	(Firm/ Company	·)	
4401 E COLONIAL DR STE 204- H			
	(Address)		
ORLANDO, FL 32803			
(Cì	ty/ State and Zip C	Code)	
INFO@EFIGCO.COM			
E-mail address: (to be used for	future annual rep	port notification)	
For further information concerning this matter, please cal	1:		
WANDY FIGUEROA	_ ai	407	873-3999
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payab	le to the Florida I	Department of S	tate:
Cenificate of Status (43.75 Filing Fee & Certified Copy Additional copy is enclosed)	Certific s Certifie	onal Copy is
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tatlahassee, FL 32314	An Div The 24	reet Address mendment Section vision of Corpor ae Centre of Ta 15 N. Monroe llahassee, FL 32	ations Hahassee Street, Suite 810

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CHRISTIAN CHURCH RAINS OF GRACE INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N14000007882

(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. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	7022	-
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BON</u>)	UL -1 AHIO: 38	

D. <u>If amending the registered agent and/or registered office address in Florida, enter the name of the</u> new registered agent and/or the new registered office address:

Name of New Registered Agent:

Vew Registered Office Address:

(Florida street address)

(City)

_, Florida _____ (Zip Code) The new

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 (Inicer; 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, Make 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 lemove, and Sally Smith, SV as an Add.

Example. <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT John I.</u> V Mike J. SV Sally S	lones	
Type of Aynon (Check One)	Title	<u>Name</u>	Address
1) Change Add	<u>s</u>	Charityn Rivera	2627 LEHIGH AVE KISSIMMEE, FL 34741
Remove			
2) Chrunge Add			
3) Remove 3) Change Add Remove			
4) Change Add	<u></u>		
Remove			
5) Change Aud			
Remove			
6) Change Add			
Remove			
E. If amending or add	ling additional A	rticles, enter change(s) here:	

(attach additional sheets, if necessary). (Be specific)

		•	
,		•	

The date of each amendment(s) adoption: date this document was signed.	06/24/2022	, if other than the
06/24/2022	to 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 date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(<u>CHECK ONE</u>)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated	06/24/2022
Dated	\bigcirc μ
Signatur	I will by
	(By the chairman or vice chairman of the board, p

(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)

,

Angel L. Baez

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• . .

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(Typed or printed name of person signing)

President

(Title of person signing)