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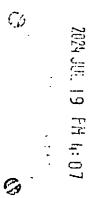
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Central Florida Athletic Conference Corp.
DOCUMENT NUMBER: N1400008284
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Christopher Wiseman
Candlelight Christian Academy (Firm/Company)
209 East Sessoms Avenue
Lake Wales FL 33853 (City/ State and Zip Code)
(City/ State and Zip Code)
Chris wiseman @ verizon.net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Christopher Wiseman at (863) 676-0049 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& \Bigcup \\$43.75 Filing Fee \& \Bigcup \\$52.50 Filing Fee \& \Bigcup \\$Certificate of Status
Mailing Address Amendment Section Street Address Amendment Section
Division of Corporations P.O. Box 6327 Aftendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Article	s of Incorporation of	
Central Florida Athl	etic Confer	ence Corp.
(Name of Corporation as curren	itly filed with the Florida	Dept. of State)
N14000008		
(Document Numb	per of Corporation (if know	n)
Pursuant to the provisions of section 617.1006, Florida Statute mendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Pr</i>	ofit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	•
Mil- Florida Athletic Co	nference Co	The name
Mid-Florida Athletic Co name must be distinguishable and contain the word "corpora	ntion" or "incorporated" of	r the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	•	
3. Enter new principal office address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDRESS)	
		
C. Enter new mailing address, if applicable:	11.	
(Mailing address MAY BE A POST OFFICE BOX)	N/A	90
		924
		: :
). If amending the registered agent and/or registered offi	ce address in Florida, ent	er the name of the
new registered agent and/or the new registered office a		<u> </u>
Name of New Registered Agent:	N/A	
Name of New Registered Agent.	(7) 1 1	
	411	street address)
New Registered Office Address:		street address)
	N/A	
	(Citv)	, Florida (Zip Code)
	(, /	(rep was)
New Registered Agent's Signature, if changing Registered		at the contract of the contract of
hereby accept the appointment as registered agent. I am fa	muiar with ana accept the	оондановѕ ој те роѕтов.

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	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>S</u>	Nathanael Pauley	
Add Remove			
2) Change Add	<u>S</u> _	Stephany Clement	6021 Williams Rd. Seffner FL 33584
Remove 3) Change X Add		Joshua Hastings	7032 Temple Terrace Hwy Temple Terrace, FL 336
Remove			
4) Change			
Add			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additiona attach additional sheets, if necessa	ry). (Be specific)		
JA			
			<u> </u>
			•
			
			<u> </u>
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The	e date of each amendment(s) adoption:N/A	, if other than the
	e this document was signed.	
Effe	ective date if applicable: 7-9-24	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date nument's effective date on the Department of State's records.	will not be listed as the
Ade	option of Amendment(s) (CHECK ONE)	
₩	The amendment(s) was/were adopted by the members and the number of votes cast for the amendmen was/were sufficient for approval.	1 (s)
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/wer adopted by the board of directors.	e
	Dated $7-9-2024$	
	Signature (With the signature)	
	(By the chairman or vice chairman of the board, president or other officer-if directed have not been selected, by an incorporator — if in the hands of a receiver, trustee, of other court appointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	<u>)</u>
	(1 yped or printed name of person signing)	
	Treasurer	_
	(Title of person signing)	