N14000011610

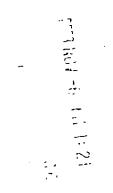
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Raper Foundation, Inc.			
N140000 DOCUMENT NUMBER:	11610			
The enclosed Articles of Amendment	and fee are submitted for	öling.		
Please return all correspondence conc	erning this matter to the fo	llowing:		
Thomas J. Odom				
	(Name of	Contact Person)		
Tom Raper Foundation, Inc.				
	(Firm	/ Company)		
9741 NW 29th Court				
16-1781 10-10	(/	\ddress)		
Hollywood, Florida 33024				
	(City/ Star	te and Zip Code)		
pastorodom@gmail.com				
E-mail add	lress: (to be used for future	annual report notificati	on)	
For further information concerning th	is matter, please call:			٦ ١ ن
Thomas J. Odom		(954)	850-9109	
(Name o	Contact Person)	(Area Code)) (Daytime Telepho	
Enclosed is a check for the following	amount made payable to the	ne Florida Department c	of State:	
■ \$35 Filing Fee □\$43.7 Certi	ficate of Status Certifie	d Copy Cert onal copy is Cert ed) (Add	50 Filing Fee ificate of Status ified Copy ditional Copy is closed)	2

Mailing Address

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florid	<u>la Dept. of State</u>)		
N14000011610			
(Document Nu	mber of Corporation	on (if known)	
Pursuant to the provisions of section 617,1006, Florida Sta amendment(s) to its Articles of Incorporation:	tutes, this <i>Florida</i>	Not For Profit Corporation adop	nts the following
A. If amending name, enter the new name of the corpo	ration:		
N/A			The new
name must be distinguishable and contain the word "corp.	oration" or "incor	porated" or the abbreviation "Co	
"Company" or "Co." may not be used in the name.			
B. Enter new principal office address, if applicable:	N/A 		
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>SS</u>)		
C. Enter new mailing address, if applicable:	N/A		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		 	
		···	
D. If amending the registered agent and/or registered		lorida, enter the name of the	7
new registered agent and/or the new registered offic	ce address:		, -
Name of New Registered Agent: N/A		<u></u>	
			-
		(Florida street address)	-
New Registered Office Address:			, [
<u>N/A</u>		, Florida	
	(City)	(Zip Coa	fe)
New Registered Agent's Signature, if changing Registe	rad Agants		

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>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Si	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
I) Change Add	D	_	PASTOR RYAN THOMPSON	1000 BISON AVENUE NEWPORT BEACH CA 92660
× Remove				
2) Change Add		_		
Remove 3) Remove Add Remove		_		
4) Change Add		<u>-</u>		
Remove 5)ChangeAdd	 	_		
Remove 6)ChangeAdd				
E. If amending or addir (attach additional shee			icles, enter change(s) here: (Be specific)	

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		2
	N/A	
The date of each amendment date this document was signed	(s) adoption:	, if other than th
_	9/22/2023	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date	e)
Note: If the date inserted in the document's effective date on t	is block does not meet the applicable statutory filing require de Department of State's records.	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes east fo proval.	or the amendment(s)

• • •

Dated	9/22/23
Signatu	(By the chairman or 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)
	Thomas J. Odom
	(Typed or printed name of person signing)

(Title of person signing)

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