N1500001812

(Re	equestor's Name)	
(Ad	ldress)	
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R. WHITE

COVER LETTER

Division of Corporations 1 Miracle War NAME OF CORPORATION: __ DOCUMENT NUMBER: N 1500001812 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee & \$43.75 Filing Fee & Certificate of Status Certified Copy □\$52.50 Filing Fee Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) Mailing Address Street Address Amendment Section Amendment Section

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

TO: Amendment Section

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

Articles of Amendment to Articles of Incorporation

reference of theorem.			
of	- : :		
7 00 - 1 - 2	15 MAR -9 AH 個: 22		
1 Miracle Way Corporation			
(Name of Corporation as currently filed with the Florida Dept. of State)	2.1		
	LALLAND STATES		

N 15000001812

(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:

	he word "corporation" or "incorporated" or the abbreviation "Corp.	7 " or
Company" or "Co." may not be used in the		
Enter new principal office address, if		
Principal office address <u>MUST BE A STREET ADDRES</u>	Suite 700 - I	
	Garnesville, FL 32606	_
. Enter new mailing address, if applica		
(Mailing address MAY BE A POST OF	FICE BOX)	_
,		
,		
-		_
		_
	or registered office address in Florida, enter the name of the	-
		-
. If amending the registered agent and/ new registered agent and/or the new i		
. If amending the registered agent and/		
). If amending the registered agent and/ new registered agent and/or the new i	egistered office address:	
. If amending the registered agent and/ new registered agent and/or the new i		_
D. If amending the registered agent and/ new registered agent and/or the new i Name of New Registered Agent:	egistered office address: (Florida street address)	_
D. If amending the registered agent and/ new registered agent and/or the new in Name of New Registered Agent:	egistered office address:	
D. If amending the registered agent and/ new registered agent and/or the new in Name of New Registered Agent:	(Florida street address) (Florida street address) , Florida (City) (Zip Cod	de)

Page 1 of 4

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 <math>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 John F V Mike J SV Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>3</u>	Gloria Hayden	Cellansay, FL 32404
2) _ X Change Add Remove		Kacy Magee	708 Sw 16 Ave Bldg. 115 Gainesville, FL 32608
3) Change Add Remove	<u> </u>	John Hayden	Calloway, FL 32404
4) Change Add Remove	3	Valencia Mann	421 Gordon Chapel Rd Howthorne, FL 32640
5) Change Add Remove			
6) Change Add			

	date of each amendment(s) adoption: 03/05/2015 this document was signed.	_, if other than the
Effe	ctive date if applicable:	
	(no more than 90 days after amendment file date)	
Ada	option of Amendment(s) (CHECK ONE)	
않∕	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 3/6/2015.	
	Signature Charled More	_
	(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)	
	Christel S. Moore	
	(Typed or printed name of person signing)	
	President.	
	(Title of person signing)	