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THE TDS INSTITUTE, INC.

TYPE OF FILING: AMENDMENT

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RETURN: CERTIFIED COPY AND GOOD STANDING PLEASE

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AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	The TDS Institute,	Inc.		
DOCUMENT NUMBER	N16000004444			
The enclosed Articles of	Amendment and fee are sub	bmitted for filing.		
Please return all correspon	ndence concerning this mat	ter to the following	:	
Bradford B. Gornto, Esq.				
		(Name of Contact	Person)	
Gornto Law				
		(Firm/ Compa	uny)	
310 Wilmette Ave., Suite	5			
		(Address)		
Ormond Beach, FL 32174				
		(City/ State and Zi	p Code)	
brad@gorntolaw.com				
	E-mail address: (to be used	for future annual r	eport notification	on)
For further information cor	ncerning this matter, please	call:		
Bradford B. Gornto			386 at	257-2554
	(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	yable to the Florida	Department of	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	is Certi (Add	60 Filing Fee ficate of Status fied Copy itional Copy is osed)

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

The TDS Institute, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N16000004444 (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: John 1:16 Foundation, Inc. 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. 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Revistered Avent: (Florida street address) New Registered Office Address: Florida (City) (Zip Code) 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

And address of each O (Attach additional shee Please note the officer/ P = President; V = Vice Executive Officer; CFO held. President, Treasu Changes should be note	officer and/oits, if necessate director title of President; 1) = Chief Fin rer, Director and in the followaves the corp	r Director being added: ry) by the first letter of the office title r= Treasurer; S= Secretary; D= ancial Officer. If an officer/direct would be PTD. wing manner. Currently John D poration, Sally Smith is named th	me of each officer/director being removed and title, name, 2: Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief ctor holds more than one title, list the first letter of each office oe is listed as the PST and Mike Jones is listed as the V. There is a V and S. These should be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	$\overline{\Lambda}$	ohn Doe Mike Jones Bally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	D	Steve Godfrey	521 A1A Beach Blvd. St. Augstine Beach, FL 32080
2) Change Add	D	Amelia Eldredge	521 A1A Beach Blvd. St. Augustine Beach, FL 32080
X Remove	<u>VD</u>	Wendy Layland	521 A1A Beach Blvd. St. Augustine Beach, FL 32080

Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional she	ing additional Art ets, if necessary).	ticles, enter change(s) here: (Be specific)	

4) ____ Change ____ Add

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The date of the board of the second	doption: December 28, 2022	. <u>.</u>	
date this document was signed.	аориол:	, if oth	ет
Effective date if applicable:			
	(no more than 90 days after amenda	nent file date)	
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory fepartment of State's records.	filing requirements, this date will not be listed	l as
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of	votes cast for the amendment(s)	

•

3	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 12/26/00
	Signature
	(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)
	· · · · · · · · · · · · · · · · · · ·
	Brad Layland
	(Typed or printed name of person signing)

(Title of person signing)