Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H23000143380 3)))



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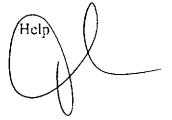
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN RELIGIOUS SCIENCE UNLIMITED INC.

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TO: Amendment Section

COVER LETTER

Division of Corporations					
NAME OF CORPORATION: _	Religious Scier	nce Unlimited Inc			
DOCUMENT NUMBER:	N16000010042	2			
The enclosed Articles of Amendm	ent and fee are sub	nitted for filing.			
Please return all correspondence c	oncerning this matte	et to the following:			
Mitchell B. Kirschner, Esq.					
		(Name of Contact P	erson)		
GrayRobinson, P.A.				_	~›
		(Firm/ Compan	y)	b •	·
2255 Glades Road, Suite 3	01E				, = -
		(Address)			•-,
Boca Raton, Florida 33431					
		(City/ State and Zip	Code)		2
	address: (to be used	for future annual re	port notification	ทา)	
For further information concerning	g this matter, picase	cun;			
Mitchell B. Kirschner		i1	l	-368-3808	· ·
(Nam	e of Contact Person)	(Area Code)	(Daytime Telephone	Number)
Enclosed is a check for the follow	ing amount made pa	ayuble to the Florida	Department o	f State:	
X \$35 Filing Fee □S4 C	13.75 Filing Fee & entificate of Status	☐S43.75 Filing Fee Certified Copy (Additional copy enclosed)	is Certi (Ada	50 Filing Fee dicate of Status died Copy futional Copy is losed)	
Mailing Addre Amendment So Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	λ υ Υ 2-	treet Address mendment Sec ivision of Corp he Centre of 115 N. Monro allabassec, Fl.	porations Tallahassee ne Street, Suite 810	

To:

Articles of Amendment to Articles of Incorporation of

Religious Science Unlimited Inc.		
(Name of Corporation as currently filed with the Flor	ida Dept. of State)	
N16000010042		
(Document N	iumber of Corporation (i	'known)
Pursuant to the provisions of section 617,1006, Florida S amendment(s) to its Articles of Incorporation:	taunes, this Florida Not	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	poration:	
		The new
name must be distinguishable and contain the word "cor "Company" or "Co," may not be used in the name	раганон" эг "інсогрога	ted" or the abbreviation "Corp" or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	ESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		• •
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	l office address in Flori fice address:	da, enter the name of the
Name of New Registered Agent:		
		(Florida street address)
New Registered Office Address:		
		, Florida
	(City)	(z_{ip}, c_{oac})
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. To	ered Agent: no familiar with and acco	ept the obligations of the position.
	Signature of New Rey	istered Agent, if changing

To:

H430000133803

If amending the Officers and/or Directors, enter the title and name of each officer/director b	eing removed and title, name,
and address of each Ottiorr and/or Director being added:	1 •
A transfer of International Aleganous (Commonwell)	

15612685745

(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 blike 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add

Example: X Change X Remove X Add	$\overline{\underline{Y}}$ $\overline{\underline{\lambda}}$	ohn Doc Jike Jones Jally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add		Jill Guerra	23335 Water Circle Boca Raton, FL 33466
Remove			
2) X Change Add	D	Mary Ann Lunde	23335 Water Circle Boca Raton, FL 33486
Remove 3.) Remove Add Remove	<u> </u>		
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or add (attach additional sh	ling addition eets, if nocess	al Articles, enter change(s) here: sary). (Be specific)	
			\$ n. n

was/were sufficient for approval.

To:

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ne date of each amendment(s) adoption:	Aarch 1, 2023			, if other than the
Tourism data if annihoolder			• •	
(no m	ore than 90 days after o			
ite: If the date inserted in this block does not cument's effective date on the Department of	meet the applicable sta State's records.	tutory filing requirements	, this date will no	t be listed as the
loption of Amendment(s) (CH	ECK ONE)			
The amendment(s) was/were adopted by th	e members and the nun	ther of votes east for the	amendmentts)	

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 April 17, 2023
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)
Barbara Gaffney
(Typed or printed name of person signing)
President
(Title of person signing)
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