N17-000010183

(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	Isiness Entity Nan	ne)
(Do	ocument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, Fl. 32314

CHURCH OF NAME OF CORPORATION:	MIEL INC.		
N17000010183 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee ar	e submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
James Johnson			
	(Name of Contact I	'erson)	
Church of Miel Inc.			
	(Firm/ Compar	ıy)	
888 E Washington St Ste A			
	(Address)		
Orlando, FL 32801			
	(City/ State and Zip	(Code)	
jay@ehurchofmiel.org			
E-mail address: (to be	e used for future annual re	port notificatio	n)
For further information concerning this matter, p	olease call:		
Thomas Evans, Attorney	a	407 t	906-4077
(Name of Contact P	erson)		(Daytime Telephone Number)
Enclosed is a check for the following amount ma	ade payable to the Florida	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta		Certif is Certit	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	A D	treet Address mendment Sect ivision of Corpo he Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Church of Miel Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N17000010183 (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: 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 Registered Agent: (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

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	PT John Do V Mike Jo SV Sally Sr	ones .	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
t) Change Add	VP	J Allen McMasters	888 E Washington St Ste A Orlando, FL 32801
x Remove			
2) Change Add	<u>VP</u>	Victoria Haas	888 E Washington St Ste A Orlando, FL 32801
X Remove	<u>COO</u>	Mehdi Taitī	888 E Washington St Ste A Orlando, FL 32801
4) Change Add	<u>CFO</u>	Bruno Sousa	888 E Washington St Ste A Orlando, FL 32801
Remove 5) Change	<u>V</u>	Thomas Evans	888 E Washington St Ste A Orlando, FL 32801
6) Change Add			
E. If amending or adding (attach additional sheet		eles, enter change(s) here: (Be specifie)	
-			
	··· <u>-</u>		<u> </u>

		
		
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The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depa	c does not meet the applicable statutory filing requirements, this date will not burtment of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)	

opted by the board of directors.	
Dated June 28, 2021	7
Signature	6 6
(By the chairman or	the chairm of the board, president or other officer-if directors eted, by an incorporator if in the hands of a receiver, trustee, or
	ted duciary by that fiduciary)
James Johnson	
	(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