N170000 10183

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JUL 2 7 2021 A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

CHURCH ON NAME OF CORPORATION:	OF MIEL INC			
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee				
Please return all correspondence concerning	this matter to the fo	llowing:		
James Johnson				
	(Name of	Contact Person)		
CHURCH OF MIEL INC.				
	(Firm	/ Company)		
888 E Washington St Ste A				
	(^	(ddress)		
Orlando, FL 32801				
	(City/ Stat	e and Zip Code)		
jay@churchofmiel.org				
E-mail address: (to	be used for future	annual report notific	ation)	.,
For further information concerning this matte	t, please call;			
James Johnson		321 at	302-8611	
(Name of Contac	t Person)	(Area Co	de) (Daytime Telephor	ne Number)
Enclosed is a check for the following amount	made payable to th	e Florida Departmer	nt of State:	
■ \$35 Filing Fee □\$43.75 Filing Certificate of	Status Certified	I Copy Conal copy is Conal cop	52.50 Filing Fee ertificate of Status ertified Copy Additional Copy is inclosed)	
Mailing Address		Street Addr	255	

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

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

FILED

CHURCH OF MIEL INC.

2021 JUL -6 PH 1: 27

(Name of Corporation as currently filed with the	Florida Dept. of State)	SECRETARY OF STATE TALL AHASSEF, FLORIDS
N17000010183		1910 AHASSEF, FLORIDS
(Docume	nt Number of Corporation (if k	nown)
Pursuant to the provisions of section 617,1006, Florid amendment(s) to its Articles of Incorporation:	la Statutes, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of the o	corporation:	
		The new
name must be distinguishable and contain the word "Company" or "Co," may not be used in the name.	'corporation" or "incorporated	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	
D. If amending the registered agent and/or register		, enter the name of the
new registered agent and/or the new registered	i onice address:	
Name of New Registered Agent:		
-	(F	lorida street address)
New Registered Office Address:		
_	(City)	, Florida (Zip Code)
	(Сіў)	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		the obligations of the position.
	Signature of New Regist	ered 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 Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	CFO	Bruno Sousa	888 E Washington St Ste A Orlando, FL 32801
x Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			
E. <u>If amending or addin</u> (attach additional shee		nal Articles, enter change(s) here: ssary). (Be specific)	

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date vepartment of State's records.	vill not be listed as the
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 east for the amendmental.	(s)

adopted by the boa	ard of directors.	
Dated Signature	July 1, 2021	
()	(By the chairman or vice chairman of the board, president or other of have not been selected; by an incorporator – if in the hands of a reconther court appointed fiduciary by that fiduciary) James Johnson	
	(Typed or printed name of person signing	<u>g)</u>
	(Title of person signing)	

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