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TO:₂Amendment Section Division of Corporations

NAME OF CORPORAT	MOUNT BETHEL,	CHRISTIAN ACAD	ЕМҮ	
	N18000001933			
DOCUMENT NUMBER				
The enclosed Articles of A	mendment and fee are sub	mitted for filing.		
Please return all correspond	dence concerning this matt	er to the following:		
ANNIE L WRIGHT				
		(Name of Contact P	erson)	
MOUNT BETHEL CHRIS	STIAN ACADEMY			
·		(Firm/ Compan	y)	
901 NW 11 AVE				
		(Address)		
FT LAUDERDALE, FL 33	3311			
		(City/ State and Zip	Code)	
awright@mtbbc.org				
	E-mail address: (to be used	I for future annual rep	port notification	1)
For further information con	cerning this matter, please	call:		
ANNIE L WRIGHT		at	954	336-0116
	(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 i enclosed)	Certifi s Certifi	O Filing Fee cate of Status ed Copy ional Copy is sed)
B. 4 . 111		43		

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

MOUNT BETHEL CHRISTIAN ACADEMY INC

(Name of Corporation as currently filed with the	Florida J	Dept. of State)		
N1800	0000193	3		
(Docume	ent Numb	er of Corporation ((if known)	·
Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation:	ida Statut	es, this <i>Florida No</i>	t For Profit Corporation adopts the	following
A. If amending name, enter the new name of the	corporat	ion:		
N/A				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.		tion" or "incorpor	ated" or the abbreviation "Corp." o	_rne new or "Inc."
B. Enter new principal office address, if applicab	ile:	N/A		
(Principal office address MUST BE A STREET AL)		·
				8
				当·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>80X</u>)	N/A		
				21
				ڣۘ
				0
D. If amending the registered agent and/or regist			ida, enter the name of the	
new registered agent and/or the new registered	a omce a N/A	garess:		
Name of New Registered Agent:				
_			,	
New Registered Office Address:		•	(Florida street address)	
	N/A			
_		(Citv)	, Florida (Zip Code)	
		• /	•	
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.			cept the obligations of the position.	
	,		. 6	
	Si	gnature of New Re	gistered 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>Doe</u> <u>Joneş</u> <u>Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add	TR	Monika Suggs	901 NW 11 AV Ft Lauderdale, FL 33311
Remove			
2) Change Add			
Remove 3) Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or adding (attach additional sheet	g additional Ar	rticles, enter change(s) here: (Be specific)	
N/A			
	- ,		

N/A			
			
			
			
	-		
			
· · · · · · · · · · · · · · · · · · ·			
-			
			7.
	· · · · · · ·		
			
			
			
The date of each amendment date this document was signed			if other than the
Effective date if applicable:	06/24/2020		
	(ne	o more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on t		not meet the applicable statutory filing requirements, this date will not be of State's records.	listed as the
Adoption of Amendment(s)	(9	CHECK ONE)	
The amendment(s) was/w was/were sufficient for ap	vere adopted by	y the members and the number of votes cast for the amendment(s)	

}	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	06/24/2020 Dated
	Signature Lillieght
	(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)
	ANNIE L WRIGHT
	(Typed or printed name of person signing)
	TREASURER
	(Title of person signing)