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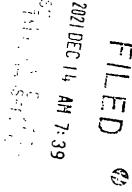
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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JAN - 5 2022

, COVER LETTER

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TO: Registration Se Division of Cor				
_	f Inspire Chri	istian Academy Inc	•	
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for tiling.		
Please return all correspo	ndence concerning this matter	to the following:		
	Sabrina	Livingston	2021 (% 0.14 AM ID: 56	
		Name of Person		
	Ir	spire Christian Academy Inc		
		Firm/Company		
	6	865 West Colonial Drive		
		Address		
	(Orlando, Florida 32818		
		City/State and Zip Code ablivingston@yahoo.com	_ 	
		to be used for future annual report notif	ication)	
For further information c	oncerning this matter, please ca			
	Livingston	321 377-5945		
Name o	f Person	at () Area Code Daytime	Telephone Number	
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addres Registration S		Street Address: Registration Sec	tion	
Division of C		Registration Section Division of Corporations		
P.O. Box 632 Tallahassee, 1		The Centre of To	allahassee : Street, Suite 810	
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Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

Inspire Christian	Academ -	1:KC	
(Name of Corporation as currently filed with the Florida	Dept. of State)		
1000081M	73850		
(Document Num	ber of Corporation (if kr	nown)	
Pursuant to the provisions of section 617,1006, Florida Statu-amendment(s) to its Articles of Incorporation:	tes, this Florida Not Fo.	r Profit Corporation ad	lopts the following
A. If amending name, enter the new name of the corpora	tion:		
name must be distinguishable and contain the word "corpore" "Company" or "Co." may not be used in the name.	demy 300 incorporated	" or the abbreviation "	The new Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	, WA		
C. Enter new mailing address, if applicable:			2021 DEC
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	NA		
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a		enter the name of the	7:39
Name of New Registered Agent:	<i>t</i>		
New Registered Office Address:	(Flo	rida sweet address)	
	<u> </u>	Florida	<u></u>
	(City)	(Zip Ci	ode)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	miliar with and accept t		sition.
Ši	gnature of New Registe	red Agent, if changing	

If amending the Officers and/or Directors.	enter the title and n	ame of each officer/di	rector being removed and	title, name.
and address of each Officer and/or Directo	r 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>V</u> <u>Mik</u>	n Doc te Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Add	UP	Kimbory Martin	
Remove 2) Change Add	5	MAHY EAY	
Remove	T.	Kathie Perking	
4) Change Add	<u> </u>	Classie Dhill	1916 W COLUMN DE
5) Change Add			
Emove Change Add			
Remove E. <u>If amending or ad</u> (attach additional s	ding additional A	articles, enter change(s) here:). (Be specific)	
Kinboly !	Down wo	es the treame now	Ine UP

	<u> </u>
The date of each amendment(s) ad date this document was signed.	ption:, if other than
L'étantion du (n. 26	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this bloc	does not meet the applicable statutory filing requirements, this date will not be listed as the
document's effective date on the Dep	irtiment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were adwas/were sufficient for approval	pted by 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.
Dated D-8:31
Signature (By the chairman or vice changes 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)
(Typed or printed name of person signing)
(Title of person signing)