## N19000000302

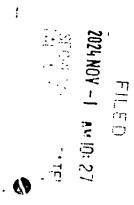
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

METHODISTS UNITED IN PRAYER, INC.  NAME OF CORPORATION:	<del> </del>
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Sam Martinez	
(Name of Contact Person)	
Methodists United in Prayer, Inc.	
(Firm/ Company)	
19313 Eastbrook Drive	
(Address)	
Odessa, FL 33556	
(City/ State and Zip Code)	
loree@mediaservicesgroup.com	
E-mail address: (to be used for future annual report notificati	on)
For further information concerning this matter, please call:	
George Reed 904	631-7093
(Name of Contact Person) (Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of	f State:
Certificate of Status Certified Copy Cert (Additional copy is Cert enclosed) (Add	50 Filing Fee ificate of Status ified Copy ditional Copy is losed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations	ction

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

METHODISTS UNITED IN PRAYER, INC.		
(Name of Corporation as currently filed with the F	lorida Dept. of State)	
N19000000302		
(Documen	t Number of Corporation (if kno	own)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
Christians United By Amor, Inc.		The new
name must be distinguishable and contain the word "company" or "Co," may not be used in the name.	corporation" or "incorporated"	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable	. 19313 Eastbrook Drive	:
(Principal office address MUST BE A STREET ADI		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>N/A</u>	
		24 NO Y - 1
D. If amending the registered agent and/or register	red office address in Florida, e	nter the name of the
new registered agent and/or the new registered	office address:	inter the name of the
Name of New Registered Agent:	'A	
		60
New Registered Office Address:	(Flor	ida street addressi
Si	'A	Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept th	ne obligations of the position.
	Signature of New Register	red 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> Y <u>S</u> V	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add			
Remove			<del> </del>
2) Change Add		<del>-</del>	
Remove 3) Remove — Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add	<del></del>		
Remove			
(attach additional shee		onal Articles, enter change(s) here: essary). (Be specific)	
N/A		<del></del>	
	<u></u>		
-			
	·		

	<u> </u>
The date of each amendment(s) adoption: N/A date this document was signed.	
Effective date if applicable: N/A (no more than 90 days after amendment )	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of 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 10/25/2024
	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)
	Sam Martinez
	(Typed or printed name of person signing)
	President

(Title of person signing)