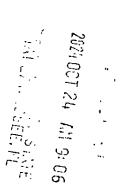


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10/24/24--01021--008 **43.75





COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Aura Lynn - Rouse CEO (Name of Contact Person) Angels of Mercur Ministries, Inc. (Jirm/ Company) Ab35 S Laurel Ave (Address) Sanford Fu 3273 (City/ State and Zip Code)
Please return all correspondence concerning this matter to the following: August CEO (Name of Contact Person) Angels of Mercy Ministries, Inc. (Jirm/ Company) 2635 S Laurel Ave. (Address)
Aura Lynn-Rouse CEO (Name of Contact Person) Angels of Mercy Ministrus, Inc. (Jirm/Company) 2635 S Laurel Ave. (Address)
Angels of Mercy Ministries, Inc dirm/Company) 2635 S Laurel Ave (Address)
2635 S Laurel Ave (Address)
Sanford FL 3273 (City/ State and Zip Code)
auralyna angels of mercy ministries. Or
For further information concerning this matter, please call:
Name of Contact Person) at 321 (696.9850 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
□ \$35 Filing Fee □ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, Fl. 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) (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	<u>PT</u> <u>V</u> <u>SV</u>	John Doc Mike Jones		· •	
X Add Type of Action (Check One)	<u>Title</u>	Sally Smith Name		<u>Addres</u> s	
l) Change Add	<u>~</u>	Boba	nachs	wkrown	
Remove 2) Change Add		Lisa	Bramlett	200 windsor Port or ange	Dr 3212
Remove 3) Change Add Remove		-			3 - 1 -
4) Change Add					
Remove 5) Change					
Add					
6) Change Add					
E. If amending or addir (attach additional shee		nal Articles, enter change(s) h ssary). (Be specific)	<u>ere</u> :		

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The date of each amendment(s) adopt date this document was signed.	ion:				, if other than th
Effective date if applicable:					
Effective date if applicable:	(no more than 90 c	days after amen	dment file date)		
Note: If the date inserted in this block deduction document's effective date on the Department.	oes not meet the app	licable statutory			ot be listed as the

Adoption of Amendment(s) (CHECK ONE)

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

_	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 10/20/1024
	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)
	Aura Lynn-Rouse (Pyped or printed name of person signing)
	CEO/President (Title of person signing)

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