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L. ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

Pray4Kay Foundation, Inc NAME OF CORPORATION:	
N20000007666 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing	ng.
Please return all correspondence concerning this matter to the follo	owing:
John C Potter	
(Name of Co	ontact Person)
(Firm/C	Company)
5204 Soule Dr	
(Add	dress)
Panama City, FL 32404	
(City/ State a	and Zip Code)
johnpotter20@gmail.com	
E-mail address: (to be used for future an	nnual report notification)
For further information concerning this matter, please call:	
John Potter	850 257-4662 at
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the l	Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ Certified C (Additional enclosed)	Copy Certificate of Status al copy is Certified Copy

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

Pray4Kay Foundation, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N20000007666 (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_ (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 X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>VP</u>	Bryanna Wooley	210 Cabero Rd Hawkinsville, GA 31036
X Remove 2) Change X Add	<u>VP</u>	Bill Shields	3011 N. Kirkwell Ave Panama City, FL 32405
Remove 3) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
— Remove 6) — Change — Add			
E. If amending or adding (attach additional sheet	g additional Arti ts, if necessary).	cles, enter change(s) here: (Be specific)	

Effective date <u>if applicable</u> : (no more than 90 days after amendment fi	le date)
The date of each amendment(s) adoption:	, if other than the

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 memladopted by the box	pers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
Dated	August 14, 2020
Signature	JLCPH_
(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)
	John C Potter
	(Typed or printed name of person signing)
	President
	(Title of person signing)