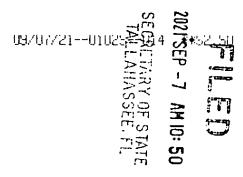
## N21000003431

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Grace Fellowship C N:	hristian Academy, Ind	<del>.</del>	<del></del>
DOCUMENT NUMBER:	21000003431			
The enclosed Articles of American	ndment and fee are sub	mitted for filing.		
Please return all corresponden	ce concerning this matt	er to the following:		
Mikayla Wood				
		(Name of Contact Pe	erson)	
Grace Fellowship Christian A	cademy, Inc.			
		(Firm√ Company	<i>;</i> )	
703 E Hwy 90				
-	· · · · · · · · · · · · · · · · · · ·	(Address)		
Bonifay, Florida 32425				
		(City/ State and Zip	Code)	
mikaylawood.gfca@outlook.c	on			
E-n	nail address: (to be used	for future annual rep	ort notification	)
For further information concer	ming this matter, please	call:		
Mikayla Wood		at	850-373-8388	
(1)	lame of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the following	lowing amount made pa	ayable to the Florida l	Department of S	State:
□ \$35 Filing Fee □	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certifie s Certifie	Filing Fee cate of Status ed Copy is sed)
Mailing Add	dress	Str	reet Address	

Amendment Section **Division of Corporations** P.O. Box 6327

Tallahassee, FL 32314

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

Grace Fellowship Christian Academy, Inc.

(Name of Corporation as currently filed with the Flor	ida Dept. of State)		
N21000003431			
(Document N	umber of Corporation	n (if known)	
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this <i>Florida N</i>	Not For Profit Corporation	adopts the following
A. If amending name, enter the new name of the corp	oration:		
N/A			The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorp	orated" or the abbreviation	"Corp." or "Inc."
B. Enter new principal office address, if applicable:	703 E Hwy 90	Bonifay, Florida 32425	s <b>2</b> (
(Principal office address MUST BE A STREET ADDRI	ESS)		7 Z
_	.=	<u></u>	
C. Enter new mailing address, if applicable:			1555 > 1555
(Mailing address MAY BE A POST OFFICE BOX)	703 E Hwy 90	Bonifay, Florida 32425	
	<del></del>		
		·	<del> </del>
D. If amending the registered agent and/or registered	office address in Flo	orida, enter the name of th	<u>ıe</u>
new registered agent and/or the new registered offi			_
Name of New Registered Agant: N/A			
	EHwy 90		
	<u>-</u>	(Florida street address)	
New Registered Office Address:		·	
Bonif	ay	, Florid	32425
<del></del>	(City)		Code)
New Registered Agent's Signature, if changing Registor hereby accept the appointment as registered agent. I are		ccept the obligations of the	position.
	Signature of New I	Registered Agent, if changin	φ

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 Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) × Change Add	<u>P</u>	MIKAYLA WOOD	2077 Happy Hollow Rd Bonifay, Florida 32425
Remove			
2) <u>x</u> Change Add	<u>V </u>	RAFE LAMB	2374 Old Mill Rd Bonifay, Florida 32425
Remove 3) x Change Add Remove	<u>TS</u>	TERESA MITCHELL	1368 Peak Rd Westville, Florida 32464
4) Change Add	D	JASON HOWELL	750 Sand Path Rd Bonifay, Florida 32425
Remove			
5) Change Add	<u>D</u>	WILLIAM JERROD JENKINS	2257 Hwy 179 Bonifay, Florida 32425
x Remove			
6) Change Add	<u>D</u>	MIKE ANDERSON	1596 Hwv 160 Westville, Florida 32464
× Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

e date of each amendment(s) adoption: 9/2/2021		
e date of each amendment(s) adoption:    2/2/2021	·	
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option of Amendment(s) (CHECK ONE)	te: If the date inserted in this block does not meet the applicable statutory filing requirement	nts, this date will not be listed as the
	The amendment(s) was/were adopted by the members and the number of votes east for the	a amendment(c)

was/were sufficient for approval.

Dated	September 2, 2021
Signatur	(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)
	Mikayla Wood
	(Typed or printed name of person signing)
	President .
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.