N21000005513

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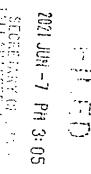
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COVER LETTER

TO: Amendment Section Division of Corporations

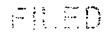
Americas for F NAME OF CORPORATION:	Healing, Prosperity and Fre	edom Inc		
N21000005513				
DOCUMENT NUMBER:	<u> </u>			
The enclosed Articles of Amendment and fee at	re submitted for filing.			
Please return all correspondence concerning this	s matter to the following:			
Lacey Price				
	(Name of Contact P	erson)		
Americas for Healing Prospertiy and Freedom				
	(Firm/ Compan	y)		_
4231 Country Breeze Lane				
	(Address)			
Crestview FL 32539				
	(City/ State and Zip	Code)		
info@athpaf.org				
E-mail address: (to b	e used for future annual re	port notification	n)	_
For further information concerning this matter,	please call:			
Lacey Price		850	598-9128	
(Name of Contact I		(Area Code)	(Daytime Telephone Number)	_
Enclosed is a check for the following amount m	nade payable to the Florida	Department of	State:	
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of \$1		Certif is Certif	0 Filing Fee feate of Status fed Copy tional Copy is osed)	
Mailing Address Amendment Section		reet Address mendment Sect	ion	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation



Americas for Healing Prosperity and Freedom Inc

2021 JUN -7 PH 3: 05

Name of Corporation as currently filed with the Flo	orida Dept. of State)	SECRETARY OF STU TALL MADDEEL F
N21000005513		TALL AHADDLEVE
(Document	Number of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not F	For Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
Americans for Healing Prosperity and Freedom Inc		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporate	ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD	RESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>X</u>)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of New Registered Agent:		a, enter the name of the
		NI 11
New Registered Office Address:	Ü	Florida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regil hereby accept the appointment as registered agent.		ot the obligations of the position.
	Signature of New Regis	stered 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> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change Add		_		
Remove				<u> </u>
2) Change Add		-		
Remove 3) Change Add Remove		_		
4) Change Add		_		
Remove 5) Change Add		_		
Remove 6) Change Add		-		
Remove				
E. If amending or addin (attach additional shee			icles, enter change(s) here: (Be specific)	
	·			

Effective date if applicable: Ino more than 90 days after amendment file date) Note: 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)			
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	Note: If the date inserted in this block document's effective date on the Departs	loes not meet the applicable statutory filing requirements, this date will not be ment of State's records.	e listed as the
	Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
was/were sufficient for approval.		ed by the members and the number of votes east for the amendment(s)	

Dated	06/03/2021
Dateti	
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
	Lacey N. Price
	(Typed or printed name of person signing)

(Title of person signing)

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