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Certified Copies	_ Certificates	of Status
Special Instructions to	Filina Officer:	
	J. HORNE	
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SECRETARY OF THE D

Office Use Only

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		COVER LETT	ER	
O: Amendment Section Division of Corporations				
NAME OF CORPORATION:	FERTIG CHRISTIAN			
N21 DOCUMENT NUMBER:	000010739		· · ·	
The enclosed Articles of Amend	Iment and fee are submi	itted for filing.		
Please return all correspondence	concerning this matter	to the following:		
Robert Fertig				
	()	Name of Contact P	'erson)	
FERTIG CHRISTIAN TRUST	FOUNDATION INC.			
		(Firm/ Company	iy)	
225 DRIFTWOOD LANE				
		(Address)		
LARGO, FL 33770				
	()	City/ State and Zip	Code)	
mailto:itrustchrist@gmail.com	ail address: (to be used I		Por Patienzatio	
E-m For further information concert			eport notriceauo	")
	ang mis matter, preuse e		727	510-6664
Robert Fertig	ime of Contact Person)	a		(Daytime Telephone Number)
Enclosed is a check for the follo		able to the Florida	Department of	
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	<u>ress</u>		treet Address mendment Sect	ion orations

Articles of Amendment to Articles of Incorporation of

2021 NOV 16 AH 1: 15

FERTIG CHRISTIAN TRUST FOUNDATION INC.

SECRETARY OF STAT TALLAHASSEE, FUT

(Name of Corporation as currently filed with the Florida Dept. of State)

N21000010739

(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:

icame must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Company" or "Co." may not be used in the name. 3. Enter new principal office address, if applicable: N/A Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) N/A O. If amending the registered agent and/or registered office address; Name of New Registered Agent: Name of New Registered Agent: Name of New Registered Agent: New Registered Office Address: New Registered Office Address: New Registered Office Address: New Registered Office Address: New Registered Office Address:		IĮ / ,	4The ne
Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>) Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) 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: N/A (Florida street address)		ition" or "incorporated" or	the abbreviation "Corp." or "Inc.
Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) (Mailing address <u>MAY BE A POST OFFICE BOX</u>) (Mailing address <u>MAY BE A POST OFFICE BOX</u>) (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; Nume of New Registered Agent; (Florida street address) (Florida street address)	Company in Co. may nor be used in the nume.	4/	10
	Enter new principal office address, if applicable:	<u>N</u> _	<u>′</u> A
(Mailing address <u>MAY BE A POST OFFICE BON</u>) . 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; <u>Name of New Registered Agent</u> : <u>New Registered Office Address</u> : <u>New Registered Office Address</u> :	Principal office address <u>MUST BE A STREET ADDRESS</u>)	
(Mailing address MAY BE A POST OFFICE BON) N//N Note: 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: N//A (Florida street address)			
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(Florida street address) New Registered Office Address:	new registered agent and/or the new registered office		
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(City) (Zip Code)	<u>Name of New Registered Agent:</u>	N/	sneer address)
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tern Darista and Amerika Champton (Cabaratin Daristan di Amerika	<u>Name of New Registered Agent:</u>	(Florida	
	<u>Name of New Registered Agent:</u>	(Florida (Florida (City) d Agent:	, Florida (Zip Code)

Signature of New Registered Agent, if changing

FILED

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>John D</u> <u>V</u> <u>Mike J</u> SV <u>Salty S</u>	ones	
<u>Type of Action</u> (Check One)	Title	Name	<u>Addres</u> s
1) Change Add	VP	Vincent Fertig	225 Driftwood Lane Largo, FL 33770
K Remove			<u> </u>
2) Change Add	<u></u>		······
3) Remove 3) Change Add Remove	. <u></u>		
4) Change Add	<u></u>	<u></u>	······································
Remove			
5) Change Add			·
Remove			
6) Change Add			
Remove			. <u></u>
E. If amending or addi (attach additional she		ticles, enter_change(s)_here: (Be specific)	
		N/A	

The date of each amendment(s) adoption:	, if other than the			
Effective date if applicable:				
Effective date if applicable:				
<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.				
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Adoption of Amendment(s) (CHECK ONE)

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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

Signature

28 10 ty

(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)

Robert Fertig

(Typed or printed name of person signing)

President

(Title of person signing)