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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: City Light Church Port Orange Inc. DOCUMENT NUMBER: N 22000003688 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kevin Thomas
(Name of Contact Person) (Firm/ Company) 2447 Tomoka Farms Port Orange, FL 32128
(City/State and Zip Code) Info @ City lightpo. org

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kevin Thomas
(Name of Contact Person) 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 Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed)

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

Enclosed)

Articles of Amendment to Articles of Incorporation of

City Light Church Port Orange Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	_
N22000003088	
(Document Number of Corporation (if known)	_
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the followamendment(s) to its Articles of Incorporation:	ving
A. If amending name, enter the new name of the corporation:	
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name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "In "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: Kevin Thomas	
2447 Tomoka Farms Rd	
New Registered Office Address:	
Port Orange, Florida 32128)
(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 X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet	ng additi ets. if nec	onal Articles, enter change(s) here: essary). (Be specific)	

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The date of each amendment(s) adoption date this document was signed.	л:	_, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Departm	es not meet the applicable statutory filing requirements, this date will not ent of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted was/were sufficient for approval.	i by the members and the number of votes cast for the amendment(s)	

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 1/15/24
Signature (By the chairman of 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)
(Typed or printed name of person signing)
(Title of person signing)
(e,