N22000006582

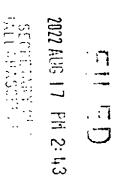
| (Requestor's Name) |
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| (- 1, - 1 |
| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
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| Special Instructions to Filing Officer: |
| J. HORNE |
| DEC - 5 2022 |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION | MERCY CHURCH (| OF PORT ORANGE, | INC. | |
|---------------------------------------|--|---|--------------------|--|
| | 2000006582 | | | |
| DOCUMENT NUMBER: | | | | |
| The enclosed Articles of Amend | dment and fee are subn | nitted for filing. | | |
| Please return all correspondence | e concerning this matte | er to the following: | | |
| KANDYCELEE | | | | |
| | | (Name of Contact Pe | rson) | |
| MERCY CHURCH | | | | |
| | | (Firm/ Company |) | |
| 877 SAMMS AVE | | | | |
| | | (Address) | | |
| PORT ORANGE, FL 32129 | | | | |
| | | (City/ State and Zip C | Code) | |
| CNDTILE@GMAIL.COM | | | | |
| E-m | ail address: (to be used | for future annual rep | ort notification |) |
| For further information concern | ning this matter, please | call: | | |
| KANDYCE LEE | | at | (386) | (334-7740) |
| (N | ame of Contact Person | | (Area Code) | (Daytime Telephone Number) |
| Enclosed is a check for the following | owing amount made pa | yable to the Florida I | Department of | State: |
| □ \$35 Filing Fee □ | \$43.75 Filing Fee & Certificate of Status | ☐\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed) | Certifi Certifi | Filing Fee cate of Status ed Copy ional Copy is sed) |
| \$4_00_ A 44 | . | C4 | nat Addanan | |

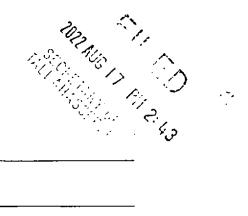
Mailing Address

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



MERCY CHURCH OF PORT ORANGE, INC.

| N22000006582 | | | | |
|--|--|--------------------------------|---|--|
| (Docum | nent Numb | er of Corporation (if kn | own) | |
| Pursuant to the provisions of section 617,1006, Floamendment(s) to its Articles of Incorporation: | rida Statute | es, this <i>Florida Not Fo</i> | r Profit Corporation adopts the following | |
| A. If amending name, enter the new name of the | e corporat | ion: | | |
| name must be distinguishable and contain the word "Company" or "Co," may not be used in the name | l "corpora | tion" or "incorporated | The new or the abbreviation "Corp." or "Inc." | |
| 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) | | 877 SAMMS AVE | | |
| | | PORT ORANGE, FL | 32129 | |
| | | 877 SAMMS AVE | | |
| | | PORT ORANGE, FL | 32129 | |
| D. If amending the registered agent and/or regi | | | enter the name of the | |
| new registered agent and/or the new register | | | | |
| Name of New Registered Agent: | KANDY | e uee | | |
| | 877 SAMMS AVE (Florida street address) | | | |
| New Registered Office Address: | | · | | |
| | PORT OF | RANGE | , Florida 32129 | |
| | | (City) | (Zip Code) | |
| New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen | Registered 11. – Lam fa | Agent: miliar with and accept | the obligations of the position. | |
| | X | andurco > | Bee | |
| - | S | gnature of New Regist | cred 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 Do V Mike Jo SV Sally So | ones | | |
|--|--|--|--|--|
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s | |
| 1) × Change Add | <u>P</u> | KANDYCE LEE | 877 SAMMS AVE PORT ORANGE, FL 32129 | |
| Remove | | | | |
| 2) × Change Add | <u>v</u> | TRACI LAHUE | 586 MOSSY OAK LN PORT ORANGE, FL 32129 | |
| Remove 3) × Change Add Remove | <u>S</u> | VICKIE FLEISHER | 73 GLENVIEW AVE PONCE INLET, FL 32127 | |
| 4) Change Add | <u>D</u> | BECKY SITA | 1350 ANNA MARIA CIR PORT ORANGE, FL 32129 | |
| × Remove | | | <u> </u> | |
| 5) Change Add | | | | |
| Remove | | | | |
| 6) Change Add | | | | |
| Remove | | | | |
| E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) | | | | |
| | <u>.</u> | | | |
| The corporation is organized exclusively for charitable, religious, educational, and scientific purposes, | | | | |
| including for such purposes, the making of distributions to organizations that qualify as an exempt organization under section | | | | |
| of the Internal Revenue | Code, or the corres | sponding section of any future federal tax coc | le. | |
| | | | | |

| Upon dissolution of the corporation, | assets shall be distributed for one or more exempt purposes within the meaning | ng |
|--|---|---------------------|
| of section 501(c)(3) of the Internal R | evenue Code, or the corresponding section of any future federal tax code, or | shall be |
| distributed to the federal government | , or state or local government for public purpose. Any such asset not so disp | osed of shall |
| be disposed of by the Court of Comp | etent Jurisdiction of the county in which the principal office of the corporation | on is then los |
| or such purpose or to such organizati | on or organizations as said Court shall determine, which are organized and o | perated |
| exclusively for such purposes. | | |
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| | | |
| The date of each amendment(s) ad date this document was signed. | option: | , if other than th |
| Effective date if applicable: 8/9/2 | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this blo document's effective date on the De | ck does not meet the applicable statutory filing requirements, this date will neartment of State's records. | ot be listed as the |
| 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.

| | | obers or members entitled to vote on the amendment(s). The amendment(s) was/were pard of directors. |
|---|-----------|---|
| • | Dated | 8/9/2022 |
| | 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) KANDYCE LEE |
| | | (Typed or printed name of person signing) |
| | | PRES |

(Title of person signing)