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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LINCE WORLD MISSION HAILAND, INC
DOCUMENT NUMBER: N 23000000 236
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
BRENOA BRAY (Name of Contact Person)
Luxe World Mission Ittailand, Inc. (Firm/Company)
260 WILLIAMSON BLUD. UNIT 730686 (Address)
ORMONA BEACH FL 32174 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at 386 - 871 - 600 5 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Pelson) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) \$36 Filing Fee \$\bigcup \\$43.75 Filing Fee & 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

	les of Amendment
Artic	to
Article	es of Incorporation of
(Name of Corporation as currently filed with the Florida	INION THAILAND, INC
N 23 000000	
	ber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopts the
A. If amending name, enter the new name of the corpora	tion:
name must be distinguishable and contain the word "corpore "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the abbreviation "Corp," a
B. Enter new principal office address, if applicable:	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	260 WILLIAMION BLVD.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	260 WILLIAMION BLVD. UNIT 730686
	ı
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered off	UNIT 730686 OR MOND BEACH, FL 321 ice address in Florida, enter the name of the
	UNIT 730686 OR MOND BEACH, FL 321 ice address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered off	UNIT 730686 OR MOND BEACH, FL 321 ice address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office new registered agent and/or the new registered office	UNIT 730686 OR MOND BEACH, FL 321 ice address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office Name of New Registered Agent:	UNIT 730686 OMMOND BEACH, FL 321 ice address in Florida, enter the name of the address: (Florida street address)
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office new registered agent and/or the new registered office Name of New Registered Agent:	UNIT 730686 OMMOND BEACH, FL 321 ice address in Florida, enter the name of the address:
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office new registered agent and/or the new registered office Name of New Registered Agent: New Registered Office Address:	UNIT 730686 OR MONO BEACH, FL 321 ice address in Florida, enter the name of the address: (Florida street address) Florida (City) Florida (Zip Code)
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office new registered agent and/or the new registered office Name of New Registered Agent:	UNIT 730686 Or Mond Betch, FL 321 ice address in Florida, enter the name of the address: (Florida street address) Florida (City) (Zip Code)
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office new registered agent and/or the new registered office Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered	UNIT 730686 Or Mond Betch, FL 321 ice address in Florida, enter the name of the address: (Florida street address) Florida (City) (Zip Code)
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office new registered agent and/or the new registered office Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered thereby accept the appointment as registered agent. I am for the signature of the s	UNIT 730686 OR MOND BEACH, FL 321 ice address in Florida, enter the name of the address: (Florida street address) Florida (City) (Zip Code)

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 Sı	ones	
Type of Action (Check One)	Title	Name	Address
1) Change Add	_0_	DWIGHT MANTIN	CHIAND MAI THULAND 50100
Remove 2) Change Add	T	JEFF KNIGHT	1100 W GMNMA BWD STE. B ORMOND DOMENT, FL JA174
Remove Change Add Remove	I	BRENDA BRAY	ORMOND DOLD, FL JEITY
4) Change Add			
Remove 5) Change Add Remove			
6) Change Add			
E. If amending or addin (attach additional shee		icles, enter change(s) here: (Be specific)	

	

<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.

Adoption of Amendment(s)

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes east 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 $\frac{9/30/23}{}$				
	Signature				
	have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)				
	JEFF KNIGHT				
	(Typed or printed name of person signing)				
	TREASUROR				
	(Title of person signing)				