

N23000001765

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/13/23--01001--007 **52.50

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2023 APR 13 AM 10:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 22, 2023

AMERICAN MISSIONS, INC.
C/O HOLLY NEWKIRK
PO BOX 465017
LAWRENCEVILLE, GA 30042 US

SUBJECT: AMERICAN MISSIONS, INC.
Ref. Number: N23000001765

It has been brought to our attention the registered agent address as well as the principal and/or mailing address of AMERICAN MISSIONS, INC., listed at 156 SAN REMO BLVD NORTH LAUDERDALE FL 33068 (P,D AND S AS WELL), is incorrect as it belongs to another individual or other entity.

Therefore, the purpose of this letter is to notify this entity: 1.) of the incorrect data; and 2.) that it is a third degree felony to knowingly and willingly falsify or conceal a material fact or make any false, fictitious, or fraudulent statement in any matter within the jurisdiction of the Florida Department of State.

Please consider this notice of our intent to administratively dissolve/revoke this entity on or after May 21, 2023 if the registered agent's address and the other addresses are not corrected.

Please complete and submit the enclosed form with the appropriate fee to avoid further action by this office. If the current year annual report has not been filed, this change may be made at the time of filing the annual report at no additional charge.

Please let us know should you have any questions.

Sincerely,
Becky McKnight
Division of Corporations

Letter No: 423A00006651

RECEIVED

APR 07 2023

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www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: American Missions, Inc.

Name of Corporation

DOCUMENT NUMBER: N23000001765

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Austin Saturday Zeegaye Lowe

Name of Contact Person

Firm/Company

146 San Remo Blvd

Address

North Lauderdale, FL 33068

City/State and Zip Code

satlowe7@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Austin Saturday Zeegaye Lowe

at (

954

Area Code

822-7603

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certificate of Status

☒ \$43.75 Filing Fee & Certified Copy

☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

American Missions, Inc.

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

N23000001765

(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:

A. If amending name, enter the new name of the corporation:

_____ The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
"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)

146 San Remo Blvd.

North Lauderdale, FL 33068

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

146 San Remo Blvd.

North Lauderdale, FL 33068

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:

146 San Remo Blvd.

(Florida street address)

New Registered Office Address:

North Lauderdale

(City)

Florida 33068

(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

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TALLAHASSEE, FL

☐ 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 _____
(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)

(Typed or printed name of person signing)

(Title of person signing)

~~ARTICLES OF CORRECTION~~

For

American Missions, Inc.

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

N23000001765

Document Number (if known)

Pursuant to the provisions of Section 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

These articles of correction correct Articles of Incorporation
(Document Type Being Corrected)

filed with the Department of State on 1/31/23
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Please correct Physical and mailing address, Registered Office Address, Incorporator's and Board of Directors'

addresses from:

156 San Remo Blvd.

North Lauderdale, FL 33068

To:

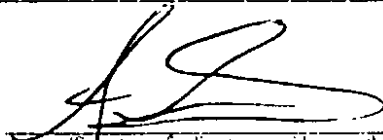
146 San Remo Blvd.

North Lauderdale, FL 33068

Correct the inaccuracy, incorrect statement, or defect:

3291 NW 66th Street
FT Lauderdale,
FL 33309

954 204 4886



(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Austin Saturday Zeegaye Lowe

(Typed or printed name of person signing)

Incorporator

President

(Title of person signing)

Filing Fee: \$35.00