N2300005934

| (Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | |
|--|---|
| (City/State/Zip/Phone #) (City/State/Zip/Phone #) (PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | (Requestor's Name) |
| (City/State/Zip/Phone #) (City/State/Zip/Phone #) (PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | |
| (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | (Address) |
| (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | |
| (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | (Address) |
| (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | (1000) |
| (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | |
| (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | (City/State/Zip/Phone #) |
| (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | PICK-UP WAIT MAIL |
| (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | |
| Special Instructions to Filing Officer: | (Business Entity Name) |
| Special Instructions to Filing Officer: | |
| Special Instructions to Filing Officer: | (Document Number) |
| Special Instructions to Filing Officer: | , |
| Special Instructions to Filing Officer: | Cartified Conice Cartificator of Status |
| jun - 5 2023 | Certified Copies Certificates of Status |
| jun - 5 2023 | |
| _ | Special Instructions to Filing Officer: |
| _ | , |
| _ | r |
| _ | 3017 - 5 2023 |
| | _ |
| | |
| | |
| | |

Office Use Only

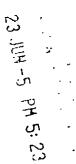


800409738128

JUN - 5 2023

OU. 0 . 20 H2160, H007 - *#52.56

07/27/2023



COVER LETTER

TO: Amendment Section.

| Grace + Mercy NAME OF CORPORATION: | y Harvest Ministries, It | nc. | | | |
|---|---------------------------|----------------|--------------------|--|---|
| N23000005934 DOCUMENT NUMBER: | | | | | |
| The enclosed Articles of Amendment and fee a | re submitted for filing. | | | | |
| Please return all correspondence concerning this | s matter to the following | ng: | | | |
| Shawn Gay | | | | | |
| | (Name of Conta | act Person) | | | |
| | (Firm/ Con | npany) | | | |
| 6452 Hannah Stables Drive | | | | | |
| | (Addre | ss) | | | |
| Jacksonville, Florida 32244 | | | | | |
| | (City/ State and | Zip Code) | | | |
| shawn_gay@netzero.net | | | | | |
| E-mail address: (to b | e used for future annu | al report noti | fication | 1) | |
| For further information concerning this matter, | please call: | | | | |
| Shawn Gay | | 904 at | | 327-7791 | |
| (Name of Contact I | Person) | | Code) | (Daytime Telephone Number) |) |
| Enclosed is a check for the following amount m | ade payable to the Flo | rida Departn | nent of | State: | |
| ☐ \$35 Filing Fee ☐ \$43.75 Filing Fe Certificate of \$6 | | y | Certifi Certifi | O Filing Fee icate of Status ied Copy tional Copy is osed) | |

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

Grace + Mercy Harvest Ministries, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N23000005934 (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: N/A 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: (Florida street address) New Registered Office Address: , Florida (City) (Zip Code)

(City), Florida
(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 Doc 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) | | | |
| 4) Change Add | | | |
| Remove | | | |
| 5) Change Add | | | |
| Remove | | | |
| 6) Change Add | | | |
| Remove | | | |
| E. If amending or addin (attach additional shee | | nal Articles, enter change(s) here; ssary). (Be specific) | |
| Purpose: Grace + Mercy | Harvest N | linistries Inc. is organized exclusively for charit | able, religious, educational, and |
| | | ng distributions to organizations that qualify as | |
| | | Code, or the corresponding section of any future | - |
| | | | |
| | | | |

| Dissolution: Upon dissolution of this Corporation, assets shall be distributed for one or more exempt purposes within the |
|---|
| meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, |
| or shall be distributed to the federal government, or to the state or local government for public purpose. |
| |
| No part of net earnings of the Corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, |
| or other private persons for any reason not authorized by the Board of Directors, except that the Corporation shall be |
| authorized and empowered to pay reasonable, measurable and verifiable competitive compensation for services rendered |
| to the Corporation and to make payments and distributions in furtherance of the purposes set forth in Purpose clause above. |
| No substantial part of the activities of the Corporation shall be dedicated to, or otherwise attempt to influence legislation, |
| and the Corporation shall not participate or intervene in any political campaign on behalf of or in opposition to any |
| candidate for public office. Norwithstanding any other provision of these Articles, the Corporation shall not, except |
| to an insubstantial degree engage in any other activities or exercise any powers that are not in the furtherance of the |
| purposes of this Corporation. |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| |
| The date of each amendment(s) adoption: $\frac{5/31/2023}{1}$, if other than the date this document was signed. |
| Effective date if applicable: |
| ino more than 90 days after amendment file date) |
| Note: 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 cast for the amendment(s) was/were sufficient for approval. |

| Dated | 5/31/2023 |
|-----------|---|
| Signature | Shown Doy |
| (| 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) |
| | Shawn Gay |
| | (Typed or printed name of person signing) |

(Title of person signing)

■ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were