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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: Florida Faith Allianc	ce Inc			_
DOCUMENT NUMBER:	N23000013861				
The enclosed Articles of An		mitted for filing.			
Please return all correspond	ence concerning this matte	er to the following:			
Lynne Barletta					
		(Name of Contact Po	erson)		
Florida Faith Alliance					
		(Firm/ Company	y)		
1722 SE Indian St					
		(Address)			
Stuart Fl					
		(City/ State and Zip	Code)		
info@floridafaithalliance.o	rg -mail address: (to be used	l for future annual re	oort notification	n)	
For further information con-	cerning this matter, please	call:			
Lynne Barletta		at	772	834-8844	
	(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the	following amount made pa	ayable to the Florida	Department of	State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	0 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 Articles of Incorporation of

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Florida Faith Alliance Inc		र्ग वं स्थानक	tires turi
(Name of Corporation as currently filed with the Florida D	ept. of State)	2024 JUH 21	
N23000013861			KI 1. Z
(Document Number	er of Corporation (if known)		 - (<u>.)</u>
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit C</i>	orporation adopts t	he following
A. If amending name, enter the new name of the corporati	on:		
			The new
name must be distinguishable and contain the word "corporat" "Company" or "Co," may not be used in the name.	ion" or "incorporated" or the a	bbreviation "Corp.	" or "Inc."
B. Enter new principal office address, if applicable:	1722 SE Indian St		
(Principal office address MUST BE A STREET ADDRESS)	Stuart, FL 34997		
C. Enter new mailing address, if applicable:			_
(Mailing address MAY BE A POST OFFICE BOX)	PO BOX902		
	PALM CITY, FL34991		
D. If amending the registered agent and/or registered offic	e address in Florida, enter the	name of the	
new registered agent and/or the new registered office a			
Name of New Registered Agent:			
	(Florida street e	uldress)	
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far	Agent: niliar with and accept the obliga	tions of the position	1.
	gnature of New Registered Agen	t. 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>Y</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	D	Barbara Warner	JENSEN BEACH, FL. 34957
× Remove			
2) Change Add	VP	Ginger Kirilia	Port St Lucie, Fl 34952
Remove 3)	<u>T</u>	Frank Dwelley	193 Raintree Trail Jupiter, Fl 33458
4) Change	<u>S</u>	Kim Baumgardner	2813 Serenity Cir S. Fort Pierce, Fl 34982
Remove			
5) Change Add	D	Janet Berrong	4735 Lucerne Lakes Blvd E 416 Lake Woth Fl 23467
Remove			
6) Change Add	D	Jay Jenkins	7654 SE MUIR WOODS LANE HOBE SOUND, FL. 33455
* Remove			
		onal Articles, enter change(s) here: essary). (Be specific)	
Article I The name of the	e corporat	ion is: FLORIDA FAITH ALLIANCE INC	
		he organization is organized exclusively for is: charita	ble, religious, educational, and scienti
		Code, or corresponding section of any future federal t	
Article IV Upon the diss	olution o	this organization, assets shall be distributed for one of	r more purposes within the meaning c

Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state o

Article V The manner in which dir	rectors are elected or appointed is: AS PROVIDED FOR IN THE BYLAWS
Article VI The name and Florida s	treet address of the registered agent is: Visionary Centers International Inc
1724 SE INDIAN ST STUART. F	L. 34997 I certify that lam familiar with and accept the responsibilities
of registered agent. Registered Age	ent Signature:
Article VII Article VI The name at	nd address of the incorporator is: LYNNE BARLETTA 1724 SE INDIAN ST
STUART, FL 34997 Electronic Si	ignature of the encorporator
Article VIII The initial officers) an	nd/or directors) of the corporation is/are:
Title: P Denise Thalacker 11 SE B	Beech Tree Lane Stuart, Fl 34994
Title: VP Ginger Kirilia 1573 SE	Sunshine Ave Port St Lucie, Fl 34952
Title: S Kim Baumgardner 2813 Se	erenity Cir S Ft Pierce , Fl 34982
Title: T Frank Dwelley 193 Raintro	ree Trail, Jupiter Fl 33458
Title : D JENNIFER KERR ISE C	DCEAN BLVD STUART, FL. 34994
Title: D Janet Berrong 4735 Lucer	ne Lakes Blvd E 416 Lake Worth Fl 23467
NOTE: Please remove Elaine Raci	icot 1963 SW PALM CITY RD STUART, FL. 34994
NOTE: Please remove Mushtaq M	faxwell 1233 SE FLEMING WAY STUART, FL. 349
Article VIII The effective date for	this corporation shall be: 01/01/2024
The date of each amendment(s) a date this document was signed.	adoption: 5.31.2014, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	tho more than 90 days after amenament fre date)
Note: If the date inserted in this bl document's effective date on the D	lock does not meet the applicable statutory filing requirements, this date will not be listed as the pepartment of State's records.

adopted by the board of directors.	
Dated 5.31,2024	
have not been selected,	chairman of the board, president or other officer-if directors by an incorporator – if in the hands of a receiver, trustee, or duciary by that fiduciary)
Denise Thalacker	(Typed or printed name of person signing)
President	(Title of person signing)

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