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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

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NAME OF CORPO	ORATION: HEALING TEMI	PLE OF SPIRIT AND LOV	Æ. INC.		
	IBER: N24000004636			_	
The enclosed Article	s of Amendment and fee are si	abmitted for filing.		-	
Please return all corr	espondence concerning this ma	atter to the following:			
	Robert Sadler				
		Name of Contact Perso	ın	<del></del>	
	HEALING TEMPLE OF SP				
		Firm/ Company		<del></del>	
	14660 Banana Tree Lane	Tittle Company			
		Address			
	Clearwater,, Fl. 33760				
		City/ State and Zip Cod	le .		
	dunedin [111@hotmail.com			2024	~~
	E-mail address: (to be us	sed for future annual report	notification)		-
For further information	on concerning this matter, plea	se call:		2024 HAY 22 AH 9: 39	77
Robert Sadler		727	4922977	ي من	
Name	of Contact Person	Area Co	)de & Daytime Telephone Nur	mber	
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:		
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	)	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

HEALING TEMPLE OF SPIRIT AND LOVE, INC.

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

(Name of Course of the		
N24000004636	urrently filed with the Florida Dep	i. of State)
(Document Nu	unber of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation a	dopts the following amendment(s)
A. If amending name, enter the new name of the corporat	tion: N/A	
name must be distinguishable and contain the word "corporate "Inc.," or Co.," or the designation "Corp." "Inc." or "Corp." chartered," "professional association," or the abbreviation	Co". A professional corporation n	The new or the abbreviation "Corp.," ame must contain the word
B. Enter new principal office address, if applicable:	11/4	202
(Principal office address MUST BE A STREET ADDRESS	; / /s —————————————————————————————————	) # T
		. 2
/		- 2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<b>X</b>	9-30
(mailing duaress MAT BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
D. If amending the registered agent and/or registered office	ce address in Florida, enter the nar	ne of the M
new registered agent and/or the new registered office a	iddress:	1.77
Name of New Registered Agent		
(Flo	orida street address)	
New Registered Office Address:		. Florida
	(City)	(Zip Code)
	11/2	
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent.—I am far	miliar with and accept the obligation.	s of the position.
Signature of	New Registered Agent, if changing	
Check if applicable		

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	PT	John Doe		
X Remove	<u>V</u>	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	TR	Rev. Elisabeth Johnson	5511 Dinah Place	
X Add			Saraosta, FL 34231	
Remove				
2) Change				
Add			2024	
Remove 3) Change			2024 HAY 22	
Add				
Remove			9: 39	7-
4) Change			39	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Articles, enter chan Attach additional sheets, if necessary). (Be specific)		1.//					
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f an amendment provides for an exchange, reclassific	ation or e	ancellation of	icenad churo				
provisions for implementing the amendment if not co	intained in	the amendme	ent itself:	<u> </u>			
(if not applicable, indicate N/A)				,			

The date of each amendmedate this document was sign			11 Ounc	er than the
Effective date if applicable				
	(no more than 90 days after amendment file date)			_
Note: If the date inserted i document's effective date or	n this block does not meet the applicable statutory filing requirements, this is the Department of State's records.	s date will	not be lis	sted as the
Adoption of Amendment(s	( <u>CHECK ONE</u> )			
The amendment(s) was/w action was not required.	ere adopted by the incorporators, or board of directors without shareholder	action and :	sharehold	ег
☐ The amendment(s) was/w by the shareholders was/	vere adopted by the shareholders. The number of votes east for the amendme were sufficient for approval.	ent(s)		
☐ The amendment(s) was/w must be separately provi	ere approved by the shareholders through voting groups. The following stated ded for each voting group entitled to vote separately on the amendment(s):	ement		
"The number of vot	es cast for the amendment(s) was/were sufficient for approval			
by	,~			
	(voting group)			
5/16 Dated	5/24		<b>~</b> 3	
Signature <sub>.</sub>	Robert Ele	> :	YVH 1202	en.:::
(	By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	ourt i	IAY 22	9 1
	Robert Sadler		AM 9	
	(Typed or printed name of person signing)	<u> </u>	<del>3</del> 39	
	President	~ ;	9	
	(Title of person signing)	<u>.</u>	·	-