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ECRETARY OF STATE LLAHASSEE, ELONIDA

COVER LETTER

TO: Amendment Section Division of Corporations

MERRITT ISLAND CHURCH OF CHRIST 2 INC NAME OF CORPORATION:	
N24000005910	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
DENISE M MCNEELY	
(Name of Contact Person)	
MERRITT ISLAND CHURCH OF CHRIST 2 INC	
(Firm/ Company)	
PO BOX 540591	
(Address)	
MERRITT ISLAND, FL 32954	
(City/ State and Zip Code)	
dmac121471.dm@gmail.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
DENISE M MCNEELY (321)368-1627	
(Name of Contact Person) (Area Code) (Daytime Telephone N	umber)
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee	
Mailing Address Street Address	

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, Fl. 32314

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

MERRITT ISLAND CHURCH OF CHRISTN 2 INC

(Name of Corporation as currently filed with the Flori-	da Dept. of State)	
N24000005910		
(Document Nu	imber of Corporation (if known)	·
Pursuant to the provisions of section 617,1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation	n adopts the following
A. If amending name, enter the new name of the corpo	pration:	
NOT APPLICABLE		The new
name must be distinguishable and contain the word "corp" Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviati	
B. Enter new principal office address, if applicable:	NOT APPLICABLE	
(Principal office address MUST BE A STREET ADDRE	<u></u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NOT APPLICABLE	
		SE(62
		3 to F
D. If amending the registered agent and/or registered		
new registered agent and/or the new registered offi		ES E
NoT Name of New Registered Agent:	APPLICABLE	
		等帝 二
	(Florida street address)	
New Registered Office Address:		
		rida
	(City) (7	Lip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I am		he position.
	Signature of New Registered Agent, if chan	ging

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 Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	DIR	JASPER SAMUEL	442 MAGNOLIA AVENUE #22 MERRITT ISLAND, FL 32952
X Remove			
2) Change Add	DIR	KENNETH CROOKS	410 S. ORLANDO AVENUE COCOA BEACH, FL 32931
Remove 3)			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
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The date of each amendmen late this document was signed	(s) adoption: AUGUST 5, 2024	, if other than the
	AUGUST 5 ,2024	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in the	is block does not meet the applicable statutory filing requirement	nts, 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.

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 AUGUST 5, 2024 Signature M. McNeel
(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)
DENISE M MCNEELY
(Typed or printed name of person signing)
REGISTERED AGENT/DIRECTOR
(Title of person signing)