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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI	Teophany Universit	y and School of Ch	aplain I	nc		
IVACIISAENT NIIBADED.	N24000006946					
DOCUMENT NUMBER:						
The enclosed Articles of An	nendment and fee are sub	mitted for filing.				
Please return all correspond	ence concerning this mat	ter to the following	:			
Abel C. Peguero Colon						
		(Name of Contact	Person	)		
		(Firm/ Comp	anu)			
		(Firm Comp.	ally)			
180 N Hacienda						
· · · · · · · · · · · · · · · · · · ·	• ,	(Address	)		······································	_
Clewiston FI, 33440						
		(City/ State and Z	ip Code	)		_
Dr.Abelpeguero@gmail.co	m					
	-mail address: (to be use	d for future annual	report n	otification	0)	_
For further information con	cerning this matter, please	e call:				
Rolando Ayala			786 at		319-2639	
***	(Name of Contact Person			a Code)	(Daytime Telephone Number)	_
Enclosed is a check for the	following amount made p	ayable to the Florid	la Depa	rtment of	State:	
■ \$35 Filing Fee	☐\$43,75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional copenclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing /			Street A	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 Amendment	<u></u>
	to	
	Articles of Incorporation of	, ,
	OI .	<u>.</u>
Teophany University and School of Chaplain Inc.		<u> </u>
(Name of Corporation as currently filed with th	e Florida Dept. of State)	
N24000006946		- 
(Docur	nent Number of Corporation (if ki	nown)
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	orida Statutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the followin
A. If amending name, enter the new name of th	e corporation:	
Theophany University and School of Chaplain Inc.		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica	180 N. Hacienda	
(Principal office address <u>MUST BE A STREET A</u>		
	<del></del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i> )	
D. If amending the registered agent and/or regi		enter the name of the
new registered agent and/or the new register		
Name of New Registered Agent:	Peguero Moreno, Carolyn J.	
	180 N. Hacienda	
	(FI	orida street address)
New Registered Office Address:	:	
	Clewiston	. Florida 33440
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ager		the obligations of the position.
-		
	Signature of New Regist	ered 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	PT         John Do           V         Mike Jo           SV         Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
l) × Change Add	<u>PT</u>	Abel C. Peguero Colon	180 N. Hacienda Clewiston Fl. 33440
Remove  2) × Change Add	SEC	Yenis S. Jiron	370 S. Estribo St. Clewiston Fl, 33440
Remove 3) Remove Add Remove		·	
4) Change Add	<del></del>		
Remove 5) Change Add Remove			
6) Change Add			
E. If amending or addin (attach additional sheet	g additional Arti	cles, enter change(s) here: (Be specific)	

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	6/21/2024			
The date of each amendmen date this document was signed	t(s) adoption:			, if other than the
	6/21/2024			
Effective date <u>if applicable</u> :		days after amendme	nt file date)	
Note: If the data incarted in a				
Note: If the date inserted in t document's effective date on	the Department of State's reco	pricable statutory mi rds.	ing requirements, this dat	e will not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

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	06/21/2024					
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)					
	Abel C. Peguero Colon					
	(Typed or printed name of person signing)					
	President					
	(Title of person signing)					