

## 1124000011558

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:  Faith Base Christian	n Academy Inc		
N24000011558			<del>.</del>
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	omitted for filing.		
Please return all correspondence concerning this mate	ter to the following:		
Ashley Lumpkin			
	(Name of Contact Po	erson)	
Faithful Servant Consulting Ilc			
	(Firm/ Company	y)	
5560 Old Dixie Hwy Unit 450			
	(Address)		
Grant, Fl 32949			
	(City/ State and Zip	Code)	
Ashley@faithfulservantconsultant.org			
E-mail address: (to be use	d for future annual rej	port notification	1)
For further information concerning this matter, please	e call:		
Ashley Lumpkin	at	321	298-7827
(Name of Contact Person	n)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida	Department of	State:
	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi is Certifi	Difiling Fee scate of Status and Copy stional Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ar Di	reet Address mendment Secti vision of Corpo ne Centre of T	orations

2415 N. Monroe Street, Suite \$10

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Faith Base Christian Academy Inc

(2) (2) (3) (4) (1) (1) (1) (1)	PL CL D				
(Name of Corporation as currently filed with th	<u>e Fiorida D</u>	ept. of State)			
N24000011558					
(Docur	nent Numbe	er of Corporation (if known)			
Pursuant to the provisions of section 617,1006, Flo amendment(s) to its Articles of Incorporation:	orida Statute	s, this <i>Florida Not For Profit Co</i>	rporation adopts	the foll	lowing
A. If amending name, enter the new name of th	e corporati	on:			
Faith Based Christian Academy Inc				Th	e new
name must be distinguishable and contain the word		ion" or "incorporated" or the ab	breviation "Corp	)." or "	Inc."
"Company" or "Co." may not be used in the nam  B. Enter new principal office address, if applications		N/A	SEC	2024	
(Principal office address MUST BE A STREET A			Fig	024 DEC	
			— <del>2</del> 2	6	:
					П
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	B <u>OX</u> )	5560 Old Dixie Hwy Unit 450	ES ES	l ∴ Kd	ζ;
		Grant, Fl 32949	J.E.	12	
			Fal		
D. If amending the registered agent and/or reginew registered agent and/or the new register			name or the		
Name of New Registered Agent:		ervant Consulting Llc			
	5560 Old	Dixie Hwy Unit 450			
		tFlorida street ac	ldressi		
<u>New Registered Office Address</u> :	: Grant		3294	d O	
		//*/i- <b>♠</b>	, Florida (Zip Code)		
		(City	(Zip Couc)		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent	Registered nt. Lam fan	$\frac{\Delta y Mt}{Mt}$	ions of the positio	on.	
		.4	مد		
-		enature New Resistered 40 a.	If changing		
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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 S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
i) Change Add	<u>s</u>	Iona Farrier	3080 Jupiter Blvd Se Palm Bay ,F1 32909
X Remove  2) Change Add	<u>s</u>	Lorna Farrier	3080 Jupiter Blvd Palm Bay Fl 32909
Remove 3 ) Change Add Remove			
4) Change Add			
Remove  5) Change Add Remove			
6) Change Add			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
	-		

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The date of each amendment(s) adoption: 12 16 2024 date this document was signed.	و واد مرماه سرواد داد د
date this document was clared	_, ii other than the
date this document was signed.	
Effective date if applicable:  (no more than 90 days after amendment file date)	
(no 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 document's effective date on the Department of State's records.	oe listed as the
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	12/16/2024
Signatu	
	(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)
	Gillian Danclair
	(Typed or printed name of person signing)

(Title of person signing)