## N41414

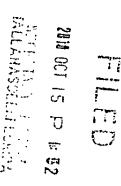
(Re	equestor's Name)	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Good Shepher	rd Christian Acade	my, Inc.			
N41414 DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee a	re submitted for fi	ling.			
Please return all correspondence concerning thi	s matter to the foll	owing:			
Cammie Baker					
	(Name of C	Contact Person)			
Good Shepherd Christian Daycare and Acaden	ıy, Inc.				
	(Firm/	Company)	<del></del>		
PO Box 66150					
	(A	ddress)	· · · · · · · · · · · · · · · · · · ·		
Jacksonville, FL 32218					
	(City/ State	and Zip Code)			
CarmelynKinsey@gmail.com					
E-mail address: (to	oe used for future a	innual report no	tification	)	,
For further information concerning this matter,	please call:				
Cammie Baker		904 at		635-4636	
(Name of Contact	Person)		Code)	(Daytime Teleph	one Number)
Enclosed is a check for the following amount n	nade payable to the	: Florida Depart	ment of S	State:	
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Certificate of \$		Copy nal copy is	Certifi Certifi	O Filing Fee cate of Status ied Copy tional Copy is used)	
Mailing Address		Street A	ddress		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Good Shepherd Christian Academy, Inc.	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
N41414	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:
Good Shepherd Christian Daycare and Academy, Inc.	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 abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
(Principal office adaress <u>MOST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered offic	te address in Florida, enter the name of the
new registered agent and/or the new registered office a	
Name of New Registered Agent: N/A	
New Registered Office Address:	(Florida street address)
	Florida 55
New Registered Agent's Signature, if changing Registered	(City) (Zip Code)
I hereby accept the appointment as registered agent. I am fai	niliar with and accept the obligations of the position.
Si	gnature of New Registered 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.

Examp <u>X</u> Ch <u>X</u> Re <u>X</u> A	ange :move	<u>V</u> <u>N</u>	ohn Doe like Jones ally Smith			
	of Action k One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1)	Change		N/A			
	Add					
_	Remove					
2)	Change		***************************************			
	Add					<del></del>
	Remove					
3)	Change					
	Add					
	Remove					
4)	Change			· · · · · · · · · · · · · · · · · · ·		- <del>,</del>
	Add					
	Remove					
5)	Change					
	Add				*124	
	Remove					
6	Change					
	Change	<u> </u>				
	Add					
	Remove					

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
N/A	
	····
	<u> </u>

l'he	e date of each amendment(s) adoption:	other than the
iate	te this document was signed.	
Effe	fective date if applicable:	
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be li cument's effective date on the Department of State's records.	sted as the
Ade	loption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes east 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.	
	October 6, 2018 Dated	
	Signature Carnely D. Lusee  (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)	
	Carmelyn D. Kinsey	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	