## N42893

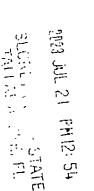
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## "COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: THE APOSTOLIC	CHURCH IN AMERICA	, INC.
DOCUMENT NUM	NU2803		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	BARBARA SIMPSON		
		Name of Contact Person	n
		Firn/ Company	
	18700 NE 3rd CourtApt, #61	1	
		Address	···,
	N. MIAMI, FL 33179		
		City/ State and Zip Cod	e
	apostolicchurchofamerica@g	mail.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
BARBARA SIMPSO	N	at (786	985-3850
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current	tly filed with the Florid	a Dept. of State)	
42893			
(Document Number of	of Corporation (if knowr	1)	
rsuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corpora	ation adopts the follo	owing amendment(s) to
If amending name, enter the new name of the corporation:			
		. 19 .1 11	The new
me must be distinguishable and contain the word "corporation," 'nc.," or Co.," or the designation "Corp," "Inc," or "Co", chartered," "professional association," or the abbreviation "P.A.	A professional corpora		
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRESS</u> )			
		<del></del>	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			<del></del>
If amending the registered agent and/or registered office add		he name of the	~ ~ ~ ~ ~ ~
new registered agent and/or the new registered office addres	<u>8:</u>		2023 JUL 21 PH IZ: 54 SECONDARY SING STAT
Name of New Registered Agent			걸음 =
(Florida si	treet address)		
New Registered Office Address:		, Florida	275
	(City)		Zip Codē): 👝 🔂
			그림 열
			m
ew Registered Agent's Signature, if changing Registered Agen	t:	inations of the model	
who are not the annuistment or resistant and the fourthing	- wan ана ассері те оон	ganons of the positi	on,
nereby accept the appointment as registered agent. I am familiar	•		
vereby accept the appointment as registered agent. I am familiar	·		
nereby accept the appointment as registered agent. I am familiar	,		

Check if applicable

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

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	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	SD	RUTH M CLAHAR	20337 NE 2nd Avenue
Add			Apt. # 7A
X Remove			MIAMI, FL 33179
2) $\frac{\overline{X}}{}$ Change	TS	BARBARA M SIMPSON	18700 NE 3rd Court
Add			Apt. #611
Remove 3 ) X Change	V	DANIEL HENRY	N. MIAMI, FL 33179
Add			6785 Moonlit Drive
Remove			Delray Beach, FL 3344
4) Change			7023 JUL
Add			
Remove			
5) Change			
Add			<u> </u>
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)			
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If an amendment provides for an exchange, reclassification, or cancellation of issued shares,			
provisions for implementing the amendment if not contained in the amendment itself:	- SE	1919	
(if not applicable, indicate N/A)	TVLL/	3 Je	-
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The date of each amendment(s) adoption:date this document was signed.	July 11, 2023	, if other than the
·	July 11, 2023	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file de	ate)
Note: If the date inserted in this block does no document's effective date on the Department of		nents, this date will not be listed as the
Adoption of Amendment(s) ( <u>CH</u>	ECK ONE)	
The amendment(s) was/were adopted by the action was not required.	incorporators, or board of directors without share	reholder action and shareholder
☐ The amendment(s) was/were adopted by the s by the shareholders was/were sufficient for a		amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	shareholders through voting groups. The follo group entitled to vote separately on the amendi	**
"The number of votes cast for the amen  by Board of Direct  (voti	dment(s) was/were sufficient for approval  LRS (6)  ng group)	
Dated	2023 ua Simpson	
(By a director, presi	thent or other officer 2 if directors or officers har reporator – if in the hands of a receiver, trustee, if	
BARBARA	SIMPSON	
(	Typed or printed name of person signing)	2023 SEC
DIRECTOR		
(	Title of person signing)	L21 PNI2: 54  AND STATE  AND STATE  AND STATE  FL