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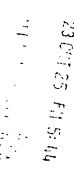
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Family Christia	an Fellowship, Inc.		
N44890 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are	e submitted for filling.		
Please return all correspondence concerning this	matter to the following	g:	
Steven Goodspeed			
	(Name of Contac	t Person)	
My Church Law Firm			
	(Firm/ Comp	pany)	
2201 Spinks Road, Ste 208			
	(Address	)	
Flower Mound, Texas 75022			
	(City/ State and Z	Cip Code)	
steven@mychurchlawfirm.com			
E-mail address: (to be	used for future annual	report notification	n)
For further information concerning this matter, p	lease call:		
Steven Goodspeed		469 at	300-8696
(Name of Contact Pe	erson)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount ma	de payable to the Flori	da Department of	State:
☐ \$35 Filing Fee		Certifi by is Certifi	D Filing Fee icate of Status ied Copy is iconal Copy is essed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporate Centre of T	prations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

#### Articles of Amendment to Articles of Incorporation of

Top of the state o

Family Christian Fellowship, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N44890 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The Local Church, Inc. name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: , Florida\_ (Zip Code) (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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.

Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Addr <u>es</u> s
1) Change Add		-	<del></del>	
Remove				
2) Change Add		-		
Remove 3) Remove Add Remove		-		
4) Change Add		-		
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5) Change Add		-		
Remove				
6) Change Add	<del> </del>	-		
Remove				
E. If amending or addin (attach additional sheet	g additio s, if nece.	nal Artic ssary).	cles, enter change(s) here: (Be specific)	
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The date of each amendment(s) adoption	:	_, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	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 document's effective date on the Department	s not meet the applicable statutory filing requirements, this date will not not of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the 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.
9/9/2023 Dated
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)
Eric Gamero
(Typed or printed name of person signing)
Lead Pastor-President
(Title of person signing)

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Family Christian Fellowship, Inc.		
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are submitted for filling.		
Please return all correspondence concerning this matter to the following	ng:	
Steven Goodspeed		
(Name of Conta	act Person)	
My Church Law Firm		
(Firm/ Com	pany)	
2201 Spinks Road, Ste 208		
(Addres	s)	
Flower Mound, Texas 75022		
(City/ State and	Zip Code)	
steven@mychurchlawfirm.com		
E-mail address: (to be used for future annua	I report notificatio	n)
For further information concerning this matter, please call:		
Steven Goodspeed	469 at	300-8696
(Name of Contact Person)		(Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Flor	ida Department of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing I Certificate of Status	Certifi py is Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee

# Articles of Amendment to Articles of Incorporation

	Articles of Amenda	nent 23	
	to Articles of Incorpora	ation 230	_
	of	.,,	3
Family Christian Fellowship, Inc.			. ,
Name of Corporation as currently filed with the Fl	orida Dept. of State)	)	
N44890			
(Document	Number of Corporat	ion (if known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida	Not For Profit Corporation adopts the foilo	wing
A. If amending name, enter the new name of the con	rporation:		
The Local Church, Inc.			
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name	orporation" or "inco	The "porated" or the abbreviation "Corp." or "In	new IC."
B. Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADD</u>	<u>KESS</u> )		
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Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	21		
MAT BE A FOST OF FICE BOX	<u></u>		
·	<del></del>		
. If amending the registered agent and/or variable			
. If amending the registered agent and/or registere new registered agent and/or the new registered of	d office address in F	forida, enter the name of the	
Name of New Registered Agent:	<del>_</del>		
of the Megistered Agent.	· · · · · · · · · · · · · · · · · · ·		
		(Florida street address)	
New Registered Office Address:		11 107 Had SITTER AUGITESSY	
		, Florida	
	(City)	(Zip Code)	_
ew Registered Agent's Signature, if changing Regist	tered Agent.		
nereby accept the appointment as registered agent. I d	am familiar with and	accept the obligations of the position.	
	Signature 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

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,

Example:		Smith, SV as an Add.	S. These should be noted as John Doe, PT as a (
X Change			
X Remove	<u>FT</u> 1	ohn Doe	
X Add	<u>y</u> .	like Jones	
3 <u>3</u> . (au	<u>sv</u> <u>s</u>	ally Smith	
Type of Action			
(Check One)	Title	<u>Name</u>	
- 1.0)			Address
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Add "			
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2)			
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E. If amending or adding	additional 4 -4	cles, enter change(s) here:	
(attach additional sheets	if necessary	cles, enter change(s) here:	
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The second		
date this death amendment(s) ad	doption:	
date this document was signed.		: F
Effective date if applicable:		, it other than the
	(no more than 90 days after amendment file date)	
Note: Ifth. I.	(no more than 90 days after amendment file date)	
document's effective 1	k does not meet the applicable over	
and a criedilye date on the Depi	ck does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed on the
Adoption of Amendment(s)	(0)	and the state of the
	(CHECK ONE)	
The amendment(s) was/were ado	opted by the members and the number of votes cast for the amendment(s)	
was/were sufficient for approval.	the members and the number of votes east for the amendment(s)	
	sidericin(s)	

	9/9/2023
Dated	
Signatur	e fine mo
	(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)
	Eric Gamero
	(Typed or printed name of person signing)
	Lead Pastor-President

(Title of person signing)