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TO: Amendment Section Division of Corporations

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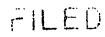
NAME OF CORPORATION	AGAPE HOUSE MI	NISTRY, INC.				
	N93000001346					
The enclosed Articles of Am	endment and fee are sub	mitted for filing.				
Please return all corresponde	nce concerning this matt	er to the following:	:			
CATHERINE JEAN SEAW	ELL					
		(Name of Contact	Person)			<u> </u>
AGAPE HOUSE MINISTR	Y, INC.					
		(Firm/ Compa	iny)			
315 E. MAGNOLIA AVEN	UE					
		(Address)				
EUSTIS, FL 32726						
		(City/ State and Zi	ip Code)			
AHMLakeFl(@gmail.com						
E	-mail address: (to be used	For future annual	report n	tification	1)	
For further information cone	erning this matter, please	call:				
CATHERINE JEAN SEAW	ELL		352 at		3572351	
(Name of Contact Person			a Code)	(Daytime Telephor	ne Number)
Enclosed is a check for the fo	ollowing amount made pa	ayable to the Florid	la Depar	tment of	State:	
☐ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing For Certified Copy (Additional copenclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address		<u>;</u>	Street A	ddress		

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 Incorporation of



AGAPE HOUSE MINISTRY, INC.

2024 OCT 15 AM II: 34

		
(Name of Corporation as currently filed with the	e Florida Dept. of State)	
AGAPE HOUSE MINISTRY, INC.		\$ 170 × 200 × 200
(Docum	nent Number of Corporation (if know	n)
Pursuant to the provisions of section 617.1006. Flo amendment(s) to its Articles of Incorporation:	rida Statutes, this Florida Not For Po	rofit Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:	
		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		r the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica		
(Principal office address MUST BE A STREET A	(DDRESS)	
	- · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	PAV	
(Mailing address MAY BE A POST OFFICE	<u></u>	
D. If amending the registered agent and/or regi	stered office address in Florida, en	ter the name of the
new registered agent and/or the new register		
Name of New Registered Agent:	CATHERINE JEAN SEAWELL	
	315 E ORANGE AVENUE	
		a Mreet address)
New Registered Office Address:		
	EUSTIS	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing		
I hereby accept the appointment as registered agen	it. I am familiar with and accept the	obligations of the position.
	7 . 7	0. 1.21
	Signature of New Registered	Savel
	signature of n eg v kegisteree	i Agent, ij 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 Sn	<u>nes</u>	
Type of Action (Check One)	Title		Name	Address
1) Change Add	ATR	_	CAIDY QUILATON	1218 PINE RIDGE ROAD LEESBURG, FL 34788
× Remove				
2) Change Add		_		
Remove		_	·	
4) Change Add		_		
Remove 5)ChangeAddRemove		_		
6) Change Add		_		
E. If amending or addir (attach additional shee			cles, enter change(s) here: tBe specific)	
			<u> </u>	
			······································	

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- · · · -	· -			
				
				
The date of each amendment(s) adop	10/04/2024			, if other than the
date this document was signed.				
Effective date if applicable:				
	(no more than 90 de	iys after amendment file	date)	
Note: If the date inserted in this block document's effective date on the Depa			quirements, this date will	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were adoption was/were sufficient for approval.	oted by the members and	d the number of votes ca	st 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.						
10/04/2024 Dated						
Signature Jakorino Kan Sawell						
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)						
CATHERINE JEAN SEAWELL						
(Typed or printed name of person signing)						
DIRECTOR						
(Title of person signing)						