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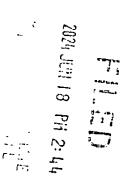
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	ly of God of Mayo. In	ic.			-
N95000004899 DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee a	are submitted for filin	ត.			
Please return all correspondence concerning th	is matter to the follow	ving:			
Donna Dennis					
	(Name of Cor	ntact Person)			
First Assembly of God of Mayo, Inc.					
	(Firm/ Co	ompany)			
P.O. Box 1748					
	(Addi	ress)			
Mayo. Fl. 32066					
	(City/ State ar	nd Zip Code)	-		
firstassemblymayo@gmail.com					
E-mail address: (to	be used for future and	nual report no	dification	1)	
For further information concerning this matter	, please call:				
Donna Dennis		386 at		208-6299	
(Name of Contact	Person)		(Code	(Daytime Telephone Nu	mber)
Enclosed is a check for the following amount i	nade payable to the F	lorida Depar	tment of	State:	
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of \$		opy	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street A Amenda Division The Cer	ent Secti of Corpo		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

First Assembly of God of Mayo, Inc.			· 	THE CO		
Name of Corporation as currently filed with the	Florida D	ept. of State)	2024 JUN 18			
N95000004899				7		
(Docum	ent Numbe	er of Corporation (if	known)	- ::;:		
Pursuant to the provisions of section 617,1006, Flor amendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida Not F</i>	Cor Profit Corporation adopts the followi	ng		
A. If amending name, enter the new name of the	: corporati	<u>on:</u>				
N/A			The ne			
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ion" or "incorporate	cd" or the abbreviation "Corp," or "Inc.			
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A		N/A		_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered	stered offic		a, enter the name of the	_		
Donna Dennis						
<u>Name of New Registered Agent:</u>	439 NE Ti	iger Lily Rd		_		
New Registered Office Address:			Florido street address)	_		
	Mayo	(City)	32066 Florida (Zip Code)	<u> </u>		
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent —	t. I am fan	niliar with and accep	ot the obligations of the position. MYLD stered 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 Doc, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange X Remove X Add	PT John De V Mike Jo SV Sally Sr	nes en	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	D	Scott Hamlin	2565 E US 27 Mayo, Fl. 32066
* Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
(attach additional shee		cles, enter change(s) here: (Be specific)	
N/A	-		
			

: :
<u> </u>
The date of each amendment(s) adoption:
Effective date if applicable: June 5, 2024 (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 listed as the document's effective date on the Department of State's records.
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.

(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)

C. Dale Croft
(Typed or printed name of person signing)

Chairman (Title of person signing)