N97000001226

| (Red | questor's Name) | |
|---------------------------|---------------------|--------|
| (Add | dress) | |
| (Add | dress) | |
| (City | y/State/Zip/Phone # |) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Name) | 1 |
| (Doa | cument Number) | |
| Certified Copies | _ Certificates of | Status |
| Special Instructions to f | Filing Officer: | |
| | - OU AO | |
| | Q. SILAS | |
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2021 DEC 10 PM 12: 50

COVER LETTER

TO: Amendment Section Division of Corporations

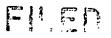
| NAME OF CORPORATION: | GADARA BAPTIS | T CHURCH, INC | • | | |
|------------------------------------|--|---|--------------------|----------------------|--|
| N97 DOCUMENT NUMBER: | 000001226 | | | | |
| The enclosed Articles of Amend | - | | | | |
| Please return all correspondence | concerning this mat | ter to the following | ā: | | |
| MISTY VEITH | | | | | |
| | | (Name of Contac | et Person |) | <u> </u> |
| GADARA BAPTIST CHURCH | | | | | |
| | | (Firm/ Comp | oany) | | |
| 6779 CR 315C | | | | | |
| - | | (Address | ;) | | |
| KEYSTONE HEIGHTS, FL 326 | 56 | | | | |
| | | (City/ State and 7 | Zip Code |) | |
| MSVEITH@HOTMAIL.COM | | | | | |
| E-mai | Taddress: (to be used | d for future annual | report n | otification |) |
| For further information concerni | ng this matter, please | e call: | | | |
| SHAWN HOUSE | | | at | | |
| (Nar | ne of Contact Person | 1) | (Are | a Code) | (Daytime Telephone Number) |
| Enclosed is a check for the follow | ving amount made p | ayable to the Flori | da Depar | tment of S | State: |
| | 43.75 Filing Fee & Certificate of Status | S43.75 Filing I Certified Copy (Additional copenclosed) | | Certifi Certifi | Filing Fee cate of Status ed Copy ional Copy is sed) |
| Mailing Addre Amendment Se | | | Street A Amenda | ddress ient Secti | on |

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



GADARA BAPTIST CHURCH, INC.

2021 DEC 10 PM 12: 50

| (Name of Corporation as currently filed with th | e Florida I | Dept. of State) | |
|---|----------------------------|---------------------------------------|---|
| N97000001226 | | | SECRETARY OF STA |
| (Docur | nent Numb | er of Corporation (if kn | |
| Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation: | orida Statuto | es, this <i>Florida Not Fo</i> | Profit Corporation adopts the following |
| A. If amending name, enter the new name of th | e corporat | ion: | |
| N/A | | | The new |
| name must be distinguishable and contain the word "Company" or "Co," may not be used in the nam | | tion" or "incorporated | " or the abbreviation "Corp," or "Inc." |
| B. Enter new principal office address, if applica | | N/A | |
| (Principal office address <u>MUST BE A STREET A</u> | <u> 1DDRESS</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 regi | | | enter the name of the |
| new registered agent and/or the new register | | M. HOUSE | |
| Name of New Registered Agent: | SHAWN | M. MOUSE | |
| | 6779 CR | | |
| New Registered Office Address: | | (Flo | rida street address) |
| <u> </u> | | NE HEIGHTS | FL |
| | | (City) | , Florida (Zip Code) |
| N v D | | • | , |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen | Registered it. Lapi fai | Agent: Miliar with and accept i | he obligations of the position |
| , | 97 | 1 | 2 < 7/ |
| | / K | aun Ti | - TTouse |
| | Si | gnature of New Registe | red 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 | PT John Do V Mike Jo SV Sally Sr | <u>ones</u> | |
|--|--|--|---|
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change Add X Remove | <u>D</u> | LEAMON WARD | PO BOX 254 KEYSTONE HEIGHTS, FL 32656 |
| 2) Change Add | <u>D</u> | EMORY BECK | PO BOX 1442 KEYSTONE HEIGHTS, FL 32656 |
| X Remove 3) Change Add X Remove | D | MILDRED DOWNS | 280 BEREA AVE KEYSTONE HEIGHTS, FL 32656 |
| 4) Change Add | <u>D</u> | JUDY OWNBEY | |
| X Remove 5) Change X Add | <u>D</u> | SHAWN HOUSE | PO BOX 2084 KEYSTONE HEIGHTS, FL 32656 |
| Remove 6) Change × Add | TS | MISTY VEITH | 7695 KAIBAB AVE KEYSTONE HEIGHTS, FL 32656 |
| E. If amending or addin (attach additional shee) | g additional Arti | cles, enter change(s) here: (Be specific) | |
| ADD TR WILBER NET | TLES 7122 W.R | THOMAS RD, KEYSTONE HEIGHTS, FL | 32656 |
| ADD TR DIANE NETT | LES 7122 W.R | THOMAS RD, KEYSTONE HEIGHTS, FL | 32656 |
| ADD TR MATTIE SPA | HN 7240 CR 3 | B15C, KEYSTONE HEIGHTS, FL 32656 | |
| | - <u>-</u> | | |

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| The date of each amendment(s) adoption date this document was signed. | n: | , if other than the |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | - |
| <u>Note:</u> If the date inserted in this block document's effective date on the Departme | es not meet the applicable statutory filing requirements, this ent of State's records. | date will not be listed as the |
| 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.

|] | There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors. |
|---|--|
| | Dated <u>Decamber</u> 7, 2021 |
| | (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) |
| | MISTY VEITH |
| | (Typed or printed name of person signing) |
| | SECRETARY |

(Title of person signing)