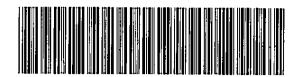
## N9900000 5306

——— (Re	equestor's Name)	
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(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
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S. YOUNG

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19 NO 30 NO 22

SUBJECT TO SERVE

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	LIBERTY CHURCH			
	<del></del> 707954			
DOCUMENT NUMBER:				<del> </del>
The enclosed Articles of Am	endment and fee are subm	nitted for filing.		
Please return all corresponde	ence concerning this matte	r to the following:		
DAVID BULLARD				
		(Name of Contact Per	rson)	
LIBERTY CHURCH, INC				
	13 201	(Firm/ Company)	)	
8900 HWY 98 WEST				
		(Address)		
PENSACOLA, FL 32506				
		(City/ State and Zip C	lode)	<del></del>
dbullard@libertychurch.net				
I.	-mail address: (to be used	for future annual repo	ort notification	1)
For further information cone	erning this matter, please	call:		
DAVID BULLARD		at	850	549-3240
	(Name of Contact Person)	)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida D	epartment of !	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	O Filing Fee icate of Status ied Copy tional Copy is seed)
Mailing A	ddress	Stre	eet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

LIBERTY NETWORK, INC.

(Name of Corporation	as currently	filed with the Florid	a Dept. of State)
N99000005306			
(Docum	nent Number (	of Corporation (if kno	wn)
Pursuant to the provisions of section 617,1006, Floramendment(s) to its Articles of Incorporation:	rida Statutes, t	his <i>Florida Not For I</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	<u> </u>	
N/A			The nev
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		" or "incorporated"	
B. Enter new principal office address, if applical	ble:	'A	
(Principal office address MUST BE A STREET AI		<del></del>	·
			5.12 6
	_		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	<u>BOX</u> ) N.	/A	16 30 17 30
	***		
D. If amending the registered agent and/or regis			ter the name of the
new registered agent and/or the new registere	DAVID BUL		
Name of New Registered Agent:	——————————————————————————————————————	LAKU	
	8900 HWY 9		
New Registered Office Address:		(Flori	da street address)
	PENSACOL.	٨	32506
		City)	, Florida (Zip Code)
Naw Dagistared Agent's Signature if changing D	Dagietawal A.~	ont:	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	t. Lam famili	<u>ent:</u> ar w <del>ith </del> and accept th	e obligations of the position.
	(-u	medal	
<del></del>	Signo		ed 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 D           V         Mike J           SV         Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VD	JOHN LAMBERT	8485 SALT GRASS DR W
Add	<del></del>		PENSACOLA, FL
X Remove			32526
2) X Change	SD	EUGENE HIGGINBOTHAM	328 MT ARY ST
Add			PENSACOLA, FL
Add			32533
<del>-</del>			
3 ) Change			
A <del>d</del> d			
Remove			<u></u>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Kemii/ve			
6) Change	<del></del>		
Add			
Remove			

,			
E. If amending or adding additional Art (attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)		
N/A			
	<del></del>		
		· <del></del> -	
			<del></del>
,	<del></del>		<del></del>
		<del></del>	<del></del>

late this document was signed.	doption:, if other than the
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blo document's effective date on the De	exk does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes east for the amendment(s) al.
■ There are no members or mem adopted by the board of direct	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.
8/27/2019 Dated	
	Im Bin
Signature (By the chair have not be	man or vice chairman of the board, president or other officer-if directors ren selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
Signature (By the chain have not be other court	en selected, by an incorporator – if in the hands of a receiver, trustee, or
Signature (By the chain have not be other court	ren selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
Signature  (By the chain have not be other court  JOSHUA	en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)  A LIPSCOMB