## 708310

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
, , , , ,
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### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:  Community Congregational Church of New Port Richey, Fl. of United Church of Chris	t Inc
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Angela Larcom	
(Name of Contact Person)	
Commun ity Congregational Church UCC	
(Firm/ Company)	
65330Circle Blvd	
(Address)	_
New Port Richey, Fl. 34652	
(City/ State and Zip Code)	
cccuccnpr@gmail.com	
E-mail address: (to be used for future annual report notification)	·=
For further information concerning this matter, please call:	
Amgela Larcom 727 3891948	
(Name of Contact Person) (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee S43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed)  S43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is Enclosed)	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassec, FL 32303



### FLORIDA DEPARTMENT OF STATE

Division of Corporations

SECTION OF THE TALLAPASSEE, FL

May 18, 2022

ANGELA LARCOM 65330 CIRCLE BOULEVARD NEW PORT RICHEY, FL 34652

SUBJECT: COMMUNITY CONGREGATIONAL CHURCH OF NEW PORT RICHEY, FLORIDA, OF THE UNITED CHURCH OF CHRIST, INC.

Ref. Number: 708310

We have received your document for COMMUNITY CONGREGATIONAL CHURCH OF NEW PORT RICHEY, FLORIDA, OF THE UNITED CHURCH OF CHRIST, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please check the type of action for each officer/director listed in your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 222A00011374



# FLORIDA DEPARTMENT OF STATE Division of Corporations SEGMENT OF STATE TALLAMASSEE, FL

April 16, 2022

ANGELA LARCOM 65330 CIRCLE BOULEVARD NEW PORT RICHEY, FL 34652

SUBJECT: COMMUNITY CONGREGATIONAL CHURCH OF NEW PORT

RICHEY, FLORIDA, OF THE UNITED CHURCH OF CHRIST, INC.

Ref. Number: 708310

We have received your document for COMMUNITY CONGREGATIONAL CHURCH OF NEW PORT RICHEY, FLORIDA, OF THE UNITED CHURCH OF CHRIST, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 822A00008936



2022 APR 13 AM 11:55

# FLORIDA DEPARTMENT OF STATE FCRETARY TALLAHASSEE, FL

February 18, 2022

ANGELA LACOM 6533 CIRCLE BOULEVARD NEW PORT RICHEY, FL 34652

SUBJECT: COMMUNITY CONGREGATIONAL CHURCH OF NEW PORT

RICHEY, FLORIDA, OF THE UNITED CHURCH OF CHRIST, INC.

Ref. Number: 708310

We have received your document for COMMUNITY CONGREGATIONAL CHURCH OF NEW PORT RICHEY, FLORIDA, OF THE UNITED CHURCH OF CHRIST, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/titleabbreviations/

If there are MEMBERS ENTITLED TO VOTE on a proposed amendment, the document must contain: (1) the date of adoption of the amendment by the members and (2) a statement that the number of votes cast for the amendment was sufficient for approval.

If there are NO MEMBERS OR MEMBERS ENTITLED TO VOTE on a proposed amendment, the document must contain: (1) a statement that there are no members or members entitled to vote on the amendment and (2) the date of adoption of the amendment by the board of directors.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 322A00004121

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

Community Congregational Church of New Port Kiche	·	2022 JUH -7-AM 10: 49
(Name of Corporation as currently filed with the Flo	rida Dept. of State)	
708310		TALLIA STAFF
(Document l	Number of Corporation (if known)	Thum, we are the
Pursuant to the provisions of section 617.1006, Florida samendment(s) to its Articles of Incorporation:	Statutes, this <i>Floridu Not For Profit Corp</i>	voration adopts the following
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	rporation" or "incorporated" or the abb	reviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI	RESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<i>-</i>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered o	ed office address in Florida, enter the na ffice address:	ime of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street add	ress)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist levely accept the appointment as registered agent. I	stered Agent: am familiar with and accept the obligation	ons of the position.
	Signature of New Registered Agent, i	f 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>v</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>Р</u>	Marilee Mills	4315 Summersun Dr New Port Richey, Fl. 34652
2) Change Add	<u>P</u>	Angela Larcom	6719 Lamprey Ln New Port Richey, Fl/ 34653
Remove 3 ) Change Add Remove	<u>T</u>	Ralph Stonier	8507 Siamang Ct. New Port Richey, Fl.34653
4) Change Add	<u>T</u>	Anne McNamara	8433 Monaco Dr Port Richey, Fl. 34668
Remove  5) Change  * Add	<u>s</u>	Betsv Turner	11816 Quincy Dr. New Port Richey, Fl. 34654
Remove 6) Change Add			
E. If amending or adding (attach additional sheet)		al Articles, enter change(s) here: sary). (Be specific)	

	<del></del>	
m to the mandenants adaption	n:	if other than the
date this document was signed.		
Effective date if applicable:		
Lifective date it appreadie.	(no more than 90 days after amendment file dat	e)
Note: If the date inserted in this block do document's effective date on the Department.	es not meet the applicable statutory filing requirement of State's records.	enicilis, unis daic will not de fisico as die
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	

The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.

	4/11/22
Dated	
Signatu	reM
	(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)
	• •
	Angela Larcom
	Angela Larcom  (Typed or printed name of person signing)