N0000005347

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3. PRATHER

COVER LETTER

TO: Amendment Section Division of Corporations

Calvary Cha	ipel of Venice, Inc.
NAME OF CORPORATION:	
N000000053	347
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee	e are submitted for filing.
Please return all correspondence concerning t Mark F. Bofill	this matter to the following:
	(Name of Contact Person)
Calvary Chapel of Venice, Inc.	
	(Firm/ Company)
602 Albee Farm Road, North	
	(Address)
Nokomis, Florida 34275	
	(City/ State and Zip Code)
info@cevenice.org	
E-mail address: (to	o be used for future annual report notification)
For further information concerning this matte	er, please call:
Mark F Bofill	(941) 599-3712
	atat(Area Code) (Daytime Telephone Number)
(Name of Contact	ct Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount	t made payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Certificate of	

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
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Calvary Chapel of Vehice, Inc.		
(Name of Corporation as currently filed with the Flor	ida Dept. of State)	
N00000005347		•
(Document N	lumber of Corporation (if known)	-
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	tatutes, this <i>Florida Not For Proj</i>	Tit Corporation adopts the following
A. If amending name, enter the new name of the corp	poration:	
N/A		The new
name must be distinguishable and contain the word "cor	poration" or "incorporated" or t	he abbreviation "Corp," or "Inc."
"Company" or "Co." may not be used in the name.	602 Albee Farm Road, Nor	th
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	ESS) Nokomis, Florida	
	34275	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	602 Albee Farm Road, Nor	th
	Nokomis, Florida	
	34275	
		the name of the
<u>Name of New Registered Agent:</u> 602 A	Albee Farm Road, North	
	(Florida s	reet address)
<u>New Registered Office Address:</u> Noko		34275 , Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. It	um familiar with and accept the or	bligations of the position. 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 = Chi 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. Ther 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 Chan Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change X_Remove X_Add	PT John D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P</u>	Wulfing, Wayne R.	594 North Quincy Road Venice, Florida 34293
 X Remove 2) Change X Add 	P, V	Bofill, Mark F.	545 Ibiza Loop Venice, Florida 34292
Remove 3) Remove X Add Remove	<u>T</u>	VanDerWege, John W.	4314 Reflections Pkwy Sarasota, Florida 34233
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or additional she See Attached - Amendment to	ets, if necessary).	icles, enter change(s) here: (Be specific)	

See Attached - Amendment to Constitution	and Bylaws			<u> </u>
				
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			<u></u>	<u> </u>
				
				 _
				
		09/25/2022		
The date of each amendment(s) adoption date this document was signed.	on:			, if other tha
Effective date if applicable:				
<u></u>	(no more than 90 days	after amendment file de	ate)	
Note: If the date inserted in this block do document's effective date on the Departm	es not meet the application of State's records.	ble statutory filing requi	irements, this 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.

	11/01/2022
Dated	
hav	he chairman or vice chairman of the board, president or other officer-if directors e not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	Wayne R. Wulfing
_	(Typed or printed name of person signing)
	President
_	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.