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ALLANASSEE FLORI

## **COVER LETTER**

TO: Amendment Section Division of Corporations	*	<b>₹</b> .
Swedish C	Church in Florida Inc.	
N0900000094	12	
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee a	are submitted for filing.	
Please return all correspondence concerning this	is matter to the following:	
Eva Lotta Collard		
	(Name of Contact Person	on)
	(Firm/Company)	
1004 Brooks Lane	(Firm/ Company)	
Delray Beach, FL 33483	(Address)	
	(City/ State and Zip Co	de)
lottacollard77@gmail.co		uc)
•	be used for future annual report	t notification)
For further information concerning this matter,	·	nottheation
Eva Lotta Collard	561	542-2243
(Name of Contact Person)		Code & Daytime Telephone Number)
Enclosed is a check for the following amount m	nade payable to the Florida Dep	partment of State:
\$35 Filing Fee \$43.75 Filing Fee Certificate of S	Fee & \$\sum \\$43.75 \text{ Filing Fee & Certified Copy (Additional copy is enclosed)}	□\$52.50 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	Amen Divisi Clifto 2661	t Address dment Section on of Corporations n Building Executive Center Circle hassee, FL 32301

## Articles of Amendment to

1	Articles of Incorporation of	PILED
Swedish Church in Florida Inc.	<del>~-</del>	15 APR 13 AN 11:07
(Name of Corporation as current N09000000942	ly filed with the Florida Dept. of State)	SECRETARY OF STATE TALLAHASSEE, FLORIDA
(Doc	cument Number of Corporation (if known)	
Pursuant to the provisions of section 617. amendment(s) to its Articles of Incorporate		or Profit Corporation adopts the following
A. If amending name, enter the new na	ame of the corporation:	The ne
name must be distinguishable and contain		
"Company" or "Co." may not be used in B. Enter new principal office address, (Principal office address MUST BE A ST	if applicable:	/A
C. Enter new mailing address, if appli (Mailing address MAY BE A POST C		
D. If amending the registered agent annew registered agent and/or the new		, enter the name of the
Name of New Registered Agent:	1004 Brooks Lane	
New Registered Office Address:	(Florida street address)	
	Delray Beach	<b>33483</b> , Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if ch hereby accept the appointment as registed		
	- Signature of their negistered rigetti, if C	nanging

Page 1 of 4

## 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> <u>N</u>	ohn Doe 1ike Jones ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DT	Jan Norelid	2840 NE 25 COURT
Add	<del></del>		FORT LAUDERDALE
X Remove			FL, 33305
2) Change	DT	Lotta Collard	1004 Brooks Lane
X Add			Delray Beach, FL 33483
Remove			
3 ) Change		N/A	
Add			
Remove		<b>N</b> 11	
4) Change		- M/A	
Add			
Remove		N /	
5) Change		MA	
Add			
Remove		<b>N</b> 11	
6) Change		N/A	
Add			
Remove		Page 2 of 4	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	
· N/A	
	· · · · · · · · · · · · · · · · · · ·

	date of each amendment(s) adopthis document was signed.	February 1, 2015	, if other than the
	•		
Effe	ective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del></del>
Ada	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/were ado was/were sufficient for approval.	oted by the members and the number of votes cast for the amendment(s)	
	There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/were	
	Dated  Signature	Ame	
	(By the chairm have not been	an or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduotary by that fiduciary)	_
	Pia Azzara	L. Corre	
	Director - Secre	yped or printed name of person signing) etary	
		(Title of person signing)	