N11000004848

| (Requestor's Name) |
|---|
| (Address) |
| . (Address) |
| (City/State/Zip/Phone #) |
| (City/State/Zip/Pflofie #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| 122 |
| Special Instructions to Filing Officer: |
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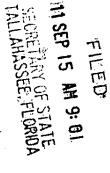
Office Use Only



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Amrs



Da 9-1611

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: The Share C | thurch Inc. | |
|--|---|---|
| DOCUMENT NUMBER: N 1100000 4849 | <u>΄</u> | |
| The enclosed Articles of Amendment and fee are submitte | ed for filing. | |
| Please return all correspondence concerning this matter to | the following: | |
| T.J. Hank | er, | |
| (Name of Cont | act Person) | |
| The Shore C | Church Inc. | |
| (Firm/ Cor | npany) | |
| 2392 Appel 005 | ia Clr | |
| | ,,,,, | |
| Sara Sota FC | 34240 1 Zip Code) | |
| (City/ State and | l Zip Code) | |
| E-mail address: (to be used for | rechurch.com | |
| For further information concerning this matter, please call: | - | n) |
| | | • |
| 1.). It inkey | nt (941) 724-3 | 145 |
| (Name of Contact Person) | (Area Code & Daytime | Telephone Number) |
| Enclosed is a check for the following amount made payable | e to the Florida Department of | State: |
| Certificate of Status C | 3 \$43.75 Filing Fee & Sertified Copy Additional copy is enclosed) | ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address | Street Address | / |
| Amendment Section | Amendment Section | |
| Division of Corporations P.O. Box 6327 | Division of Corporations | |
| Tallahassee, FL 32314 | Clifton Building 2661 Executive Center Circle | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

| Articles of | of Incorporation | FIFTH TO |
|--|--|---------------------------------|
| | of | TALCRETANY OF SHIPS |
| (Name of Corporation as currently | 1. — . | TECHES AM O. |
| (Name of Corporation as currently | filed with the Florida I | Pent of Stockie Sol (15) |
| (Name of Corporation as currently | med with the Florida | Dept. of State ASSEE, FROM TE |
| | | CORIDA |
| (Document Number of | of Corporation (if knowr | n) |
| ursuant to the provisions of section 617.1006, Flori | do Statutos, this Florida | Not For Profit Corneration ado |
| ne following amendment(s) to its Articles of Incorporation | | Thoi For Froju Corporation ado |
| (c) 10 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | VVV | |
| A. If amending name, enter the new name of the | corporation; | |
| | | |
| The new name must be distinguishable and contain | n the word "corporation | n" or "incorporated" or the |
| bbreviation "Corp." or "Inc." <u>"Company" or "Co</u> | | |
| | _ | |
| s. <u>Enter new principal office address, if applicab</u> Principal office address <u>MUST BE A STREET AD</u> | | |
| rincipal office address <u>MOST BE A STREET AD</u> | DRESS) | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE B | 0X) | |
| | | |
| | | |
| | | |
| | | |
| . If amending the registered agent and/or registe | ered office address in F | lorida, enter the name of the |
| new registered agent and/or the new registered | d office address: | |
| Name of New Registered Agent: | | |
| Ivame of Ivew Registered Agent. | 7 7 10 10 10 10 10 10 10 10 10 10 10 10 10 | |
| | | |
| New Registered Office Address: | (Florida street add | ress) |
| | | Pl:: J- |
| Market-Har-Yan- | (City) | , Florida (Zip Code) |
| | (011,97 | (Lip Code) |
| ew Registered Agent's Signature, if changing Re | | |
| hereby accept the appointment as registered ager | nt. I am familiar with | and accept the obligations of t |
| osition. | • | |
| | | |
| | | |

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)

| <u>Title</u> | <u>Name</u> | | Address | Type of Action |
|-------------------|--|---|----------------------------------|----------------|
| | | | | Add Remove |
| . | | | | ☐ Add ☐ Remove |
| | | | | ☐ Add Remove |
| E. <u>If amen</u> | <mark>ding or adding ac</mark> dditional sheets, ij | <mark>dditional Articles, e</mark> f necessary). (Be s | nter change(s) here: pecific) | |
| A | dding | Article | X - See | Attached |
| | | *************************************** | · | |
| · | | | 71-27-24-2 | |
| | | | | , |
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| , | | | | |
| | | | W- NO. W | |
| | | | | |

| The date of each amendment(s) adopti | on: |
|---|--|
| , | (date of adoption is required) |
| Effective date <u>if applicable</u> : | no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| ☐ The amendment(s) was/were adopted was/were sufficient for approval. | by the members and the number of votes cast for the amendment(s) |
| There are no members or members en adopted by the board of directors. | ntitled to vote on the amendment(s). The amendment(s) was/were |
| Dated | 1/12/11 |
| Signature | |
| (By the chairn | nan 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 fiduciary by that fiduciary) |
| | (Typed or printed name of person signing) |
| | President / Pastw (Title of person signing) |
| | (1 itle or person signing) |

Page 3 of 3

Article IX: Dissolution of Organization

Upon the dissolution of this organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.