

N21000005239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

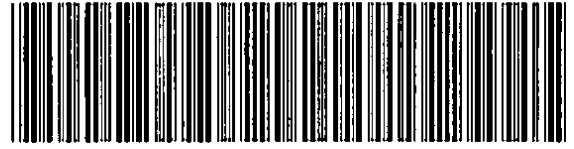
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2022 APR 25 PM 2:49

STATE OF FLORIDA  
TALLAHASSEE, FL

4/25/2022

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: THE GATHERING LIFE ENRICHMENT & COUNSELING, INC.

DOCUMENT NUMBER: N21000005239

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CYNTHIA FORRESTER  
(Name of Contact Person)

THE GATHERING LIFE ENRICHMENT & COUNSELING, INC  
(Firm/ Company)

4978 ROTHSCHILD DR.  
(Address)

CORAL SPRINGS, FL 33067  
(City/ State and Zip Code)

forrester.cynthia@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cynthia Forrester at 954-593-2744  
(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:

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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  
Tallahassee, FL 32303



RECEIVED

FLORIDA DEPARTMENT OF STATE 2022 APR 25 AM 11:33  
Division of Corporations

STATE DEPARTMENT OF  
TALLAHASSEE, FL

April 6, 2022

CYNTHIA FORRESTER  
4978 ROTHSCHILD DRIVE  
CORAL SPRINGS, FL 33067

SUBJECT: THE GATHERING LIFE ENRICHMENT & COUNSELING, INC.  
Ref. Number: N21000005239

We have received your document for THE GATHERING LIFE ENRICHMENT & COUNSELING, 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):

Bylaws are not filed with this office. Please retain them for your records.

Please correct 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: 822A00008000

4/20/22

*If possible, can this request be expedited in order to meet upcoming IRS guidelines?*

*Cynthia Forrester*

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

2022 APR 25 PM 2:49

SECRETARY OF STATE  
TALLAHASSEE, FL

THE GATHERING LIFE ENRICHMENT & COUNSELING, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

N21000005239

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

NA

\_\_\_\_\_ *The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**

*(Principal office address MUST BE A STREET ADDRESS)*

NA

**C. Enter new mailing address, if applicable:**

*(Mailing address MAY BE A POST OFFICE BOX)*

4978 ROTHSCHILD DR

CORAL SPRINGS, FL 33067

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

*Name of New Registered Agent:* NA

*New Registered Office Address:*

NA

(City)

Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*Signature of New Registered 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>NA</u>	_____	_____
2) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____

**E. If amending or adding additional Articles, enter change(s) here:**

*(attach additional sheets, if necessary). (Be specific)*

Article III is amended as follows: Said organization is organized exclusively for charitable, religious, educational purposes,  
the making of distributions to organizations that qualify as exempt organizations under section 501(C)3 of the internal  
revenue code or corresponding section of any future federal tax code. This charitable, religious, educational organization  
will provide life enrichment, training, coaching and counseling to strengthen relationships and build successful community  
relations; motivating participants to transform lives through the use of biblical principles to achieve growth and enrichment.

Adding Article V and VI respectively thereby changing the numerical sequence of the remaining articles.

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Article V

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Addition of Conflict of Interest

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The purpose of the conflict of interest policy is to protect this tax exempt organization's interest when it is contemplating entering into a transaction or arrangement that might benefit the private interest of an officer or director of the organization or might result in a possible excess benefit transaction. The policy supplements state and federal laws governing conflict of interest applicable to nonprofit and charitable organizations. The policy and the manner in which the policy is used is as provided in by laws.

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Article VI

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Addition of Dissolution of Corporation

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Upon dissolution or winding up of the corporation, its assets remaining after the payment of all debts and liabilities of this corporation shall be distributed to a non-profit corporation organized and operated exclusively for Religious, Charitable and Educational purposes under section 501(C3) of the Internal Revenue Code. All articles and amendments shall be terminated.

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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
*(no more than 90 days after amendment file date)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 4/20/2022

Signature Cynthia Forrester

(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)

Cynthia Forrester

\_\_\_\_\_  
(Typed or printed name of person signing)

Vice President

\_\_\_\_\_  
(Title of person signing)