## 702186

(Requestor's Name)  (Address)	200
(City/State/Zip/Phone #)	12/01
(Business Entity Name)  (Document Number)	
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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Boulev	ard Bible Church of New Port Richey
DOCUMENT NUMBER: 702186	
The enclosed Articles of Amendment and	d fee are submitted for filing.
Please return all correspondence concern	ing this matter to the following:
Roland D. Waller	
	(Name of Contact Person)
Waller, Mitchell & Barne	
	(Firm/ Company)
5332 Main St.	
	(Address)
New Port Richey, FL 34	652
	(City/ State and Zip Code)
For further information concerning this r	natter, please call:
Karen Buck	at ( <u>727</u> ) <u>847-2288</u>
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following am	ount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Statu	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Boulevard Bible	Church of New Port Riche ently filed with the Florida Dept. of	y, Flonida a
(Name of Corporation as curre		State)
	702186	
(Document Num	ber of Corporation (if known)	PEC BU
rsuant to the provisions of section 617.1006, a following amendment(s) to its Articles of Inc.		Profit Corpora
If amending name, enter the new name of	the corporation:	Fig. 3
BONDAGE/BREAKING		TNC. TOO
e new name must bé distinguishable and co	ontain the word "corporation" or "i	ncorporated" or the
breviation "Corp." or " Inc." <mark>"Company" o</mark> i	r "Co." may not be used in the name.	7
Enter new principal office address, if appl	licable:	•
rincipal office address <u>MUST BE A STREE</u>		
	<del></del>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFIC	CE BOX)	
If amending the registered agent and/or renew registered agent and/or the new regis		enter the name of the
new registered agent and/or the new regis	nered office address.	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
THE RESIDENCE OFFICE TRACTORS.	(1 to had street data ess)	
		, Florida
	(City)	(Zip Code)
w Registered Agent's Signature, if changin	ng Registered Agent:	
ereby accept the appointment as registered sition.		cept the obligations of th
<del></del>	ignature of New Registered Agent. if c	housius

## 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>	<u>Address</u>	Type of Action
			Add Remove
			Add Remove
E. If amen	ding or adding additional Andditional sheets, if necessary)	rticles, enter change(s) here: (Be specific)	
	-		
<del></del>			

The date of each amendment(s) adoption: _///2/08				
·	11/12/08			
	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/wer was/were sufficient for appr	re adopted by the members and the number of votes cast for the amendment(s) roval.			
There are no members or n adopted by the board of dir	nembers entitled to vote on the amendment(s). The amendment(s) was/were ectors.			
Dated	Re Varel Runghmel			
have	the 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 court appointed fiduciary by that fiduciary)			
	REV. PAUL G. BERGLUND, PASTOR (Typed or printed name of person signing)			
	PRESIDENT (Title of person signing)			

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