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

Office Use Only



600314878736

06/25/18--01007--027 **35.00

SECRETARY OF SIALE

Hmand

JUN 27 2018

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ESBYTERIAN CHURCH OF PERRY, INC.
703212	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Ellie Morgan	
	(Name of Contact Person)
First Presbyterian Church of Perry	
	(Firm/ Company)
P.O. Box 837	
	(Address)
Perry, FL 32348	
	(City/ State and Zip Code)
fpcfinancial@fairpoint.net	
E-mail address: (u	be used for future annual report notification)
For further information concerning this matte	r, please call:
Ellie Morgan	8505843826 มเ
(Name of Contac	
Enclosed is a check for the following amount	made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Certificate o	g Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee f Status
Mailing Address Amendment Section	Street Address Amendment Section

Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FIRST PRESBYTERIAN CHURCH OF PERRY, INC. (Name of Corporation as currently filed with the Florida Dept. of State) 703212 (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: N/A 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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: (Florida street address) New Registered Office Address: (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: X Change X Remove X Add	<u>PT V SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Chang	TP	James C. Bassett	307 Dogwood Way
Add			Perry, FL 32348
XRemo	ve		
2) Chang	TP	Susan Lincoln	3775 Polhill Drive
X Add			Perry, FL 32347
Remo	ve		
3) Chang	<u></u>	_	
Add			
Remo	ve		
4) Chang	e	_	
Add			
Remo	ve		
5) Chang	e	_	
Add			
Remo	ve		
Z) 29			
6) Chang	<u></u>		
Add			
Remo	ve		

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

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
tno more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the members and the number of votes cast for the at was/were sufficient for approval.	mendment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) adopted by the board of directors.	(was/were
Dated	
Signature Winds 4 Eckel	
(By the chairman or vice chairman of the board, president or other officer- have not been selected, by an incorporator — if in the hands of a receiver, other court appointed fiduciary by that fiduciary)	
Charles H. Eckel	
(Typed or printed name of person signing)	
Vice President	
(Title of person signing)	