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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	AAN ROAD FREE METHO	DDIST CHURCH IN	
704391 DOCUMENT NUMBER:			
The enclosed Articles of Amendment ar			
Please return all correspondence concern	ning this matter to the follow	ving:	
Ernest Sullivan			
	(Name of Cor	ntact Person)	· -
DILLMAN ROAD FREE METHODIS	T CHURCH INC		
	(Firm/ Co	ompany)	
6513 DILLMAN ROAD			
	(Add	ress)	
GREENACRES, FL 33413			
	(City/ State a	nd Zip Code)	
nwegreenacres@yahoo.com			
E-mail addre	ss: (to be used for future and	nual report notification	on)
For further information concerning this	matter, please call:		
Ernest Sullivan		954 at	319-4474
(Name of C	ontact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following an	nount made payable to the F	Torida Department o	f State:
S35 Filing Fee \$343.75 F Certified	Filing Fee & \$\Begin{align*} \precedent \ \precedent \ \ \precedent \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Leopy is Certi (Add	50 Filing Fee ificate of Status ified Copy litional Copy is losed)

**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

## Articles of Amendment to Articles of Incorporation of

	01	
DILLMAN ROAD FREE METHODIST CHURCH INC		
Name of Corporation as currently filed with the Flori	da Dept. of State)	
704391		
(Document No	umber of Corporatio	n (if known)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida i</i>	Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	
		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorp	orated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		orida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	1.70 - 70-10	(Florida street address)
		, Florida
	(City)	(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.

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	PT         John I           V         Mike .           SV         Sally .	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
I) Change Add	<u>T</u>	Jonathan Grassley	141 Teal Ct Royal Palm Beach, FL 33411
<ul> <li>X Remove</li> <li>2) Change</li> <li>X Add</li> </ul>	<u>T</u>	Michelle France Harris	5758 N Haverhill Road West Palm Beach, FL 33407
Remove 3) Remove Add Remove			
4) Change Add			
Remove  5)ChangeAddRemove			
6) Change Add		<del> </del>	
E. If amending or addit (attach additional shee		rticles, enter change(s) here: (Be specific)	

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The date of each amendment(s) adopted date this document was signed.	March 5, 2024			, if other than the
Effective date if applicable:			222	
<del></del>	(no more than 90 days a	fter amendment file de	ate)	

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)

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 5-5-2024 Signature Engl Sellivan
(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)
Ernest Sullivan
(Typed or printed name of person signing)
President

(Title of person signing)