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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Connected Life Chris	tian Church, Inc		
704952 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subn	nitted for filing.		
Please return all correspondence concerning this matter	r to the following:		
Gary Bowes			
	(Name of Contact Pers	son)	
Connected Life Christian Church, Inc.			
-	(Firm/ Company)	· · · ·	
2500 NW 5th Avenue			
	(Address)		
Boca Raton, FL 33431			
	(City/ State and Zip Co	ode)	
gbowes@connectedlife.cc			
E-mail address: (to be used	for future annual repor	rt notification)
For further information concerning this matter, please of	call:		
John Scott Weber	at	561	395-4901
(Name of Contact Person)	(.	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida De	partment of S	State:
\$35 Filing Fee Certificate of Status		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
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

Connected Life Christian Church, Inc.

(Name of Corporation as cur	rently filed with the Florida Dept. of State)
704952	
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 617.1006. Florida Stanmendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation adopts the following
. If amending name, enter the new name of the corpo	ration:
	The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not he used in the name.	poration" or "incorporated" or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRE.	SSS)
Trincipul Office Matrices Section 1921 Services	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
). If amending the registered agent and/or registered of	office address in Florida, enter the name of the
new registered agent and/or the new registered office	ce address:
Name of New Registered Agent:	
	(Florida sireet address)
New Registered Office Address:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	, Florida
	, Florida
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I am	ered Agent: m 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 Doc 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 Do V Mike Ja SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove			
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Article VIII. add
G. Any decision made by a vote of the congregation shall pass by a 3/4 majority or more of those in attendance and eligible
to vote.

The d	ate of each amendmei	rt(s) adoption:	, if other than the
	is document was signe		
		September 16, 2018	
Effect	ive date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note:	If the date inserted in ent's effective date on	this block does not meet the applicable statutory filing requirements, this date with the Department of State's records.	II not be listed as the
Adopt	tion of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s' approval.)
	here are no members of dopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were f directors.	
	Sep- Dated	tember 16. 2018	
	Signature	1. Acography	
	have	ne/chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	J.	ohn Scott Weber	
	_	(Typed or printed name of person signing)	
	P	resident	
	-	(Title of person signing)	