## 705056

(Re	equestor's Name)	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, Fl. 32314

NAME OF CORPORATION: Switzerland Comm	unity Church		
705056 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this ma	tter to the following:		
Jennifer Genton			
	(Name of Contact Po	erson)	<del></del>
Switzerland Community Church			
	(Firm/ Company	y)	
2179 State Road 13			
	(Address)		
Switzerland, FL 32259			
	(City/ State and Zip	Code)	
jennifer.genton@switzerlandee.org			
E-mail address: (to be use	ed for future annual rep	port notification	n)
For further information concerning this matter, pleas	se call:		
Bradley Deckard	at	904	334-4305
(Name of Contact Perso	n) at	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	Li\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	O Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section		reet Address nendment Sect	ion
Division of Corporations		vision of Corpo	

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Switzerland Community Church

	a Dept. of State)	ie Florida De	tion as currently filed with th	(Name of Corpo
				705056
	nber of Corporation (if known)	ment Number	(Docur	
he following	utes, this Florida Not For Profit Corporation adopts	orida Statutes.	risions of section 617,1006, Flo Articles of Incorporation:	
	ration:	<u>ie corporatio</u>	me, enter the new name of th	A. If amending
The new				
"or "Inc."	ration" or "incorporated" or the abbreviation "Corp.		guishable and contain the word "may not be used in the nam	
	(S)	able: 4DDRESS)	cipal office address, if applica dress MUST BE A STREET A	B. <u>Enter new pr</u> ( <i>Principal office</i>
		·	<del>-</del>	
020	<u> </u>	_		
73			ling address, if applicable:	C. Enter new n
- 2	· ·	BOX)	(Mailing address MAY BE A POST OFFICE)	
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	ffice address in Florida, enter the name of the address:		registered agent and/or regi agent and/or the new register	
		Jennifer Ge	ame of New Registered Agent:	<del></del>
	ate Road 13	2179 State 8	<u>ime oj New Registerva Ageni</u> :	
	(Florida street address)			
		:	New Registered Office Address:	
<b>)</b>	land 3225	Switzerland		
	(City) (Zip Code)			
t.	ed Agent: familiar with and accept the obligations of the position	Registered A nt l am fami	tent's Signature, if changing lappointment as registered agen	New Registered I hereby accept th
	nnifer Henton	Jen	_	
t.	City) , Florida (Zip Code)	Registered A	<u>ent's Signature, if changing l</u> appointment as registered agen -	New Registered I hereby accept th

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 = Treasurcr; 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 J           SV         Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add X Remove	<u>C</u>	Josh Johnson	1196 Stonehedge Trail Lane St Augustine, FL 32092
2) Change Add	<u>C</u>	Bradley Deckard	183 Glennevre Circle St. Augustine, FL 32092
X   Remove	<u>S</u>	Robert Lester	513 Tupelo Trace Saint Johns, FL 32259
4) Change Add	<u>S</u>	Cameron Steedlev	2545 Stapleford Lane St. Augustine, FL 32092
<ul> <li>X Remove</li> <li>5) Change Add</li> </ul>	<u>T</u>	Bradlev Deckard	183 Glenneyre Circle St. Augustine, FL 32092
<ul> <li>X Remove</li> <li>6) Change</li> <li>Add</li> </ul>	<u>T</u>	Thomas Johnson	505 E Kings College Drive Saint Johns, FL 32259
E. If amending or additional she		icles, enter change(s) here: (Be specific)	

· · · · · · · · · · · · · · · · · · ·	
<del></del> "	
<del></del>	
The date of each amendment(s) ado date this document was signed.	ption: March 24, 2020, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block document's effective date on the Department.	does not meet the applicable statutory filing requirements, this date will not be listed as the rtment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes east for the 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 3/24/20
Signature Signature
(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)
Bradley Deckard
(Typed or printed name of person signing)
Chairman, Church Council

(Title of person signing)