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ALLAHASSEE, FLORID,

JUL 28 2015

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ST PAUL UNITED M	METHODIST CHUI	RCH OF LAI	RGO, INC.
	782			
The enclosed Articles of Amend	ment and fee are subm	itted for filing.		
Please return all correspondence	concerning this matter	to the following:		
Archie L. Johnston, Executive I	Director of Church Adn	ninistraton		
	(Name of Contact Po	erson)	
St Paul United Methodist Churc	h of Largo, inc.		٠	
		(Firm/ Company	y)	
111 Highland Ave				
-		(Address)		
Largo, FL 33770				
	(1	City/ State and Zip	Code)	
arch.j@stpaulumc.org				
E-ma	il address: (to be used f	or future annual rep	ort notificati	on)
For further information concerni	ng this matter, please c	all:		
Archie L Johnston		at	727	584-8165
(Na	me of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follow	wing amount made pay	able to the Florida I	Department o	f State:
	\$43.75 Filing Fee & C Certificate of Status	343.75 Filing Fee Certified Copy (Additional copy i enclosed)	Cert s Cert (Add	50 Filing Fee ificate of Status ified Copy litional Copy is losed)
Mailing Addr	ess	Sti	reet Address	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

FILED

Articles of Incorporation

15 JUL 27 AM 8: 10

(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: 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. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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: , 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. 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</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	C	CONSTANTINOU, MIKE	1858 Paradise Lane
Add			Clearwater, FL 33764
Remove			
2) X Change	S	CIANDELLA, CHERYL	2453 Gennann Dr.
Add			Clearwater, Fl 33764
Remove			
3) Change	<u>C</u>	TROUTNER, MICHAEL W	·
Add			
X Remove			
4) Change	S	FELDT, JANICE	
Add			
X Remove			
5) Change	D	SMITH, KARA	1217 Brookside Dr.
X Add			Clearwater, Fl 33764
Remove			
6) Change	D	HAMILTON, JOHN W	1753 Pine Cone Way
X Add			Largo, FL 33771
Remove			

f amending or adding attach additional sheets	, if necessary).	(Be specific)				
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	date of each amendment(s) adoption: this document was signed.	_, if other than the
Effe	ective date <u>if applicable:</u>	
	(no more than 90 days after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not burnent's effective date on the Department of State's records.	e listed as the
Ada	option of Amendment(s) (CHECK ONE)	
Z	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	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 <u>March</u> 31, 2015	
	Signature Atchief Johnsta	_
	(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)	
	Archie L. Jehnston (Typed or printed name of person signing)	
	Executive Director Church Administrates (Title of person signing)	ÖN