## 706770

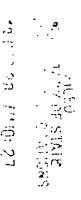
| (Requestor's Name)                      |
|---|
|   |
| (Address)                               |
|   |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
|   |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
| <u> </u>                                |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |
|   |
| complete pay 184                        |
|   |
|   |

Office Use Only



600321421966

12/06/18--01020 -013 \*\*35.00



dumo

JAN 05 2019

## COVER LETTER

TO: Amendment Section Division of Corporations First Church of Christ, Scientist, 706770 The enclosed Articles of Amendment and fee are submitted for filling. Please return all correspondence concerning this matter to the following: (Name of Contact Person) First Church of Christ, Scientist 2100 Main Street Sarasota, FL 34237-6024 (City/ State and Zip Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: (Name of Contact Person) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filling Fee S43.75 Filling Fee & S43.75 Filling Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is Enclosed) Street Address Mailing Address

Mailing 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



December 12, 2018

FIRST CHURCH OF CHRIST, SCIENTIST, SARASOTA, FLORIDA 2100 MAIN STREET SARASOTA, FL 34237-6024

SUBJECT: FIRST CHURCH OF CHRIST, SCIENTIST, SARASOTA, FLORIDA

Ref. Number: 706770

We have received your document for FIRST CHURCH OF CHRIST, SCIENTIST, SARASOTA, FLORIDA and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the cover letter, page 1 of 4 and page 4 of 4 and return the document back to our office for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 218A00025518



## Articles of Amendment to Articles of Incorporation of

First Church of Christ, Scientist, Saxasola, Florida

| (Name of Corporation as current   |                                |  |
|---|--------------------------------|--|
| OFFOF   |                                |  |
| (Document Number  | er of Corporation (if kno      | own)   |
| Pursuant to the provisions of section 617,1006, Florida Statutes amendment(s) to its Articles of Incorporation: | s, this <i>Florida Not For</i> | Profit Corporation adopts the following  |
| A. If amending name, enter the new name of the corporation  | on:                            |  |
|   |                                | The new  |
| name must be distinguishable and contain the word "corporati<br>"Company" or "Co," may not be used in the name. | ion" or "incorporated"         | or the abbreviation "Corp." or "Inc."  |
| B. Enter new principal office address, if applicable:   |                                |  |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> )   |                                | 7  |
|   |                                | <u>;</u>   |
|   |                                |  |
| C. Enter new mailing address, if applicable:  |                                | . <u>:</u>   |
| (Mailing address MAY BE A POST OFFICE BOX)  |                                |  |
| 7   |                                | 77   |
| /   |                                | 7  |
| /   |                                |  |
| D. If amending the registered agent and/or registered offic   | e address in Florida e         | nter the name of the   |
| new registered agent and/or the new registered office ac  |                                | mer the bank of the  |
|   |                                |  |
| Name of New Registered Agent:   |                                |  |
|   |                                |  |
| New Registered Office Address:  | (rta                           | rida street address)   |
| -   |                                |  |
|   | (City)                         | , Florida<br>(Zip Code)  |
| <i>;</i>  |                                | (inp date)   |
| New Registered Agent's Signature, if changing Registered  |                                | the state of the s |
| t hereby accept the appointment as registered agent. I am jan   | ullar with and accept th       | te obligations of the position.  |
| Sig   | gnature of New Register        | red Agent, if changing   |



Example:

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.

| X Change<br>X Remove<br>X Add | <u>V</u> <u>Mike</u> | t Doe<br>e Jones<br>g Smith |  |
|-------------------------------|----------------------|-----------------------------|--|
| Type of Action<br>(Check One) | <u>Title</u>         | Name                        | <u>Addres</u> s                                |
| 1) Change Add Remove          | <u>v_</u> C_         | Terri Cole                  | 2100 Main St.<br>SAMSOTA, FL<br>34237-6024     |
| 2) Change Add Remove          | <u>S</u> _           | Wynn Cooper                 | 2100 Main St.<br>SACASOTA FL<br>34237-6024     |
| 3 ) Change Add Remove         | <u>vc</u>            | Ron Musselman               | _aloo Main St.<br>Samsota, FL<br>_3427-6024    |
| 4) Change\dd<br>\dd<br>Remove | <u>45</u>            | Patricia Wright             | 2100 Main St.<br>Sarasota, FL<br>34237-6024    |
| 5) Change Add Remove          | Τ                    | Lloyd Harrison              | 2100 Main St.<br>Sarasota, FL<br>34237-6024    |
| 6) Change<br>Add<br>Remove    | Clerk                | Marjorie Bambul             | h 2100 Main St.<br>Siara sota FL<br>34237-6024 |
|                               |                      | Page 7 of 4                 | •  |

| E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
|   |  |  |  |  |  |  |  |
| Pat Wright, Clerk / Secretary   |  |  |  |  |  |  |  |
| Pat wright, Clerk / Secretary Lloyd Harrison, Treasurer   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |

| The  | date of each amendment(s) adoption:  | _, if other than the |
|------|--|----------------------|
|      | this document was signed.  |                      |
| Effe | ective date if applicable:   |                      |
|      | (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 ument's effective date on the Department of State's records.  | be listed as the     |
| Ado  | option of Amendment(s) (CHECK ONE)   |                      |
|      | The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.   |                      |
| 整    | 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>December 26,2018</u>  |                      |
|      | Signature Jerrie Cole, Vice Chairman  (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) | _                    |
|      | Terri Cole (Typed or printed name of person signing)   |                      |
|      | Vice Chairman (Title of person signing)  |                      |