

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(220,1200 2,000)	
(Document Number)	_
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Certified Copies Certificates of Status	_
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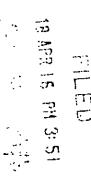
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COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

Grace	e Covenant Chur	ch of Fort Lauderda	le, Inc.	
708931 DOCUMENT NUMBER:				
The enclosed Articles of Amendment	and fee are subm	itted for filing.		
Please return all correspondence conce	erning this matter	to the following:		
E. Conway Bryan, Sr.				
	(Name of Contact Pe	erson)	
Grace Covenant Church of Fort Laud	erdale, Inc.			
		(Firm/ Company	·)	
P.O. Box 5203				
		(Address)		
Fort Lauderdale, FL 33310				
	(City/ State and Zip	Code)	
Edbryansr@gmail.com				
E-mail add	ress: (to be used	for future annual rep	oort notification	1)
For further information concerning the	s matter, please o	call:		
E. Conway Bryan, Sr.		at	954	999-3446
(Name of	Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following	amount made pay	yable to the Florida	Department of	State:
		S43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certif is Certif (Add	0 Filing Fee ficate of Status fied Copy stional Copy is osed)
Mailing Address Amendment Section Division of Corpora P.O. Box 6327		Ai Di	reet Address mendment Sect ivision of Corp ifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Grace Covenant Church of Fort Lauderdale, Inc.		
(Name of Corporation as curren	tly filed with the Flori	da Dept. of State)
708931		
(Document Numb	er of Corporation (if kn	own)
Pursuant to the provisions of section 617.1006, Florida Statutimendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For</i>	Profit Corporation adopts the following
. If amending name, enter the new name of the corporat	ion:	
NA		The new
name must be distinguishable and contain the word "corpora" (Company" or "Co." may not be used in the name.		" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	NA	
Principal office address MUST BE A STREET ADDRESS)	(2) (3)
	· · · · ·	i. 27
. Enter new mailing address, if applicable:	NT A	in the second
(Mailing address MAY BE A POST OFFICE BOX)	NA	<u> </u>
		<u> </u>
	<u></u>	<u> </u>
). If amending the registered agent and/or registered off		enter the name of the
new registered agent and/or the new registered office	address:	
Name of New Registered Agent:		
	(FI	orida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am for	d Agent: amiliar with and accept	the obligations of the position.
	Signature of Vous Posic	tered 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: XChange X Remove X Add	<u>V</u> <u>Mi</u>	nn <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	TR	RONNIE FYE	C/O Grace Covenant Church
Add			P.O. Box 5203
X Remove			Fort Lauderdale, FL 33310
2) X Change	STR	SHEARDON THOMAS	C/O Grace Covenant Church
Add			P.O. Box 5203
Remove			Fort Lauderdale, FL 33310
$\frac{X}{X}$ Change	TTR	ALVIN COLBERT, SR.	C/O Grace Covenant Church
Add			P.O. Box 5203
Remove			Fort Lauderdale, FL 33310
4) X Change	VTR	RUTH E. BRYAN	C/O Grace Covenant Church
Add			P.O. Box 5203
Remove			Fort Lauderdale, FL 33310
5) X Change	PTR	E. CONWAY BRYAN, SR.	C/O Grace Covenant Church
Add			P.O. Box 5203
Remove			Fort Lauderdale, FL 33310
6) Change		NA	
Add		<u> </u>	
Remove			- Andrews of the second

attach additional sheets, if necessary).	(Be specific)					
NA						
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The date of each amendment(s) adoption:	March 18, 2018	, if other than th
date this document was signed.		
	March 18, 2018	
Effective date <u>if applicable</u> : (/	no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Departmen	not meet the applicable statutory filing requirements, this date will not of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted b was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	
There are no members or members enti- adopted by the board of directors.	tled to vote on the amendment(s). The amendment(s) was/were	
Dated March 18, 2018		
Signature	Days	
have not been select	vice chairman of the board, president or other officer-if directors ted, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	
	E. Conway Bryan, Sr.	
	(Typed or printed name of person signing)	
	President	
-	(Title of person signing)	