11422

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COVER LETTER

TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

The Pentecostal Ho NAME OF CORPORATION:		ference of Flori	da, Inc.
711422 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub			
Please return all correspondence concerning this mat	ter to the following	:	
Elizabeth Martin			
	(Name of Contac	t Person)	
The Pentecostal Holiness Church Conference of Flo	rida, Inc.		
	(Firm/ Comp	any)	
7 W. Main St. Ste. 300			
	(Address)	
Apopka, FL 32703			
	(City/ State and Z	Cip Code)	
em@snmiphc.org			
E-mail address: (to be use	d for future annual	report notificat	on)
For further information concerning this matter, please	e call:		
Elizabeth Martin		407	880-0241
(Name of Contact Person	n)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Floric	da Department c	of State:
☐ \$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional copenclosed)	Cer by is Cer (Ad	.50 Filing Fee ifficate of Status tified Copy ditional Copy is closed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Se Division of Cor Clifton Buildin	ction porations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

The Pentecostal Holiness Church Conference of Florida, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) 711422 (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: N/A 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS C. Enter new mailing address, if applicable: N/A (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: N/A Name of New Registered Agent: N/A (Florida street address) New Registered Office Address: N/A (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position. N/A

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>V</u> <u>M</u>	ohn Doe like Jones ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Donavan Tinsley	1485 US 1 South
Add X			St. Augustine, FL 32084
X Remove			
2) Change	VP	Dave Ragan	2510 Fouraker Rd.
X Add			Jacksonville, FL 32210
Remove			
3) Change			
Add			
Remove			
4) Change		•••	
Add			
Remove			
5) Change			
Add			
Kemove			
6) Change			
Add			
Remove			

L. If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)
N/A, .	
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06/22/2018 The date of each amendment(s) adoption: , if other than the date this document was signed. 06/22/2018 Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption 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. ☐ 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 Signature (By the 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) Ray Willis (Typed or printed name of person signing) President (Title of person signing)