# 117985

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### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Washing	gton Park Ch	nurch of God, Inc.
DOCUMENT NUMBER: 717985		
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this mat-	ter to the following:	
Hugh M. Palmer		
	(Name of Contact Person	1)
Attorney at Law		
	(Firm/ Company)	— .
P. O. Box 2187		
	(Address)	
Winter Park, FL 32790		
	(City/ State and Zip Code	e)
hmplaw@aol.co		
E-mail address: (to be use	d for future annual report i	notification)
For further information concerning this matter, please	e call:	
Hugh M. Palmer	407	645-2030
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Depa	rtment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amend Divisio	Address ment Section n of Corporations Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 21, 2013

HUGH M PALMER P.O. BOX 2187 WINTAER PARK, FL 32790

SUBJECT: THE CHURCH OF GOD WASHINGTON PARK, INC.

Ref. Number: 717985

We have received your document for THE CHURCH OF GOD WASHINGTON PARK, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We can find no record of the entity named in your document. A computer printout of a similar named entity is enclosed for your review. If this is the right name, please correct your document and return it for filing.

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.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 913A00024517



#### Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current)	y filed with the Flo	rida Dept. of State)		
717985				
(Doct	iment Number of Co	orporation (if known)		
Pursuant to the provisions of section 617.1 nmendment(s) to its Articles of Incorporate		es, this <i>Florida Not For Pro</i>	fit Corporation adopts the f	òllowin
A. If amending name, enter the new na	me of the corporat	ion:		
				The nev
ame must be distinguishable and contain 'Company" or "Co." may not be used in	•	tion" or "incorporated" or	the abbreviation "Corp." o	r 'Inc.'
3. Enter new principal office address, i	f applicable:	4454 W. Conley	/ St	
(Principal office address MUST BE A STREET ADDRESS		Orlanod. FL 328	311	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4454 W. Conley	y St	
		Orlando, FL 328	311	
D. If amending the registered agent and new registered agent and/or the new			r the name of the	
Name of New Registered Agent: Hugh M F		<del></del>		
nume of New Neglmerea Agent.		iana Ave, Suite 6	6A	
New Registered Office Address:		(Florula street address)	<del></del>	
	Winter Parl	K	<sub>. Florida</sub> <u>32789</u>	
	(City)		(Zip Code)	13 BEC 1
New Registered Agent's Signature, if ch	anging Registered	Agent:	obligations of the position.	C

Page 1 of 4

Signature of New Registered Agent, if changing

STARRETARY OF STATE

## 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 <math>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>Mi</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	PD	K P Hardemon	3621 Wilts St
Add			Orlando, FL 32805
X Remove			
2) Change	TD	Joe Rogers	3012 Seabrook Ave
1012 Snabi Add			Orlando, FL 32805
X Remove			
3 ) Change	<u>D</u>	Cassandra Morris	475 Friendship Dr.
X			Orlando, FL 32835
Remove			
4) Change	D	Ceteria Hayles	5259 Letha St
X Add			Orlando, FL 32811
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

utuch additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	<del></del>
	10 10 10 10 10 10 10 10 10 10 10 10 10 1

The	the date of each amendment(s) adoption: September 17, 2013	, if other than the
	September 17, 2013	
	(no more than 90 days after amendment file date)	
Ado	doption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes east for the amer was/were sufficient for approval.	ndment(s)
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was adopted by the board of directors.	as/were
	September 17, 2013  Signature Bethe chairman or vice chairman of the board, president or other officer-if or	lirectors
	have not been selected, by an incorporator – if in the hands of a receiver, tru other court appointed fiduciary by that fiduciary)	
	Robert Williams	
	(Typed or printed name of person signing)	
	TD	
	(Title of person signing)	