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COVER LETTER

TO: Amendment Section Division of Corporations

CHRIST F NAME OF CORPORATION:	RESBYTERIA	N CHURCH OF OR	MOND B	HACH, INC	
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and f	ce are submitted	for filing.			
Please return all correspondence concerning	g this matter to the	ne following:			
TREE HAZARD					
· · · · · · · · · · · · · · · · · · ·	(Nan	ne of Contact Person	1)		
CHRIST PRESBYTERIAN CHURCH OF	ORMOND BEA	ACH, INC.			
	(Firm/ Company)	<u> </u>		
1035 WEST GRANADA BLVD					
		(Address)			33.5
ORMOND BEACH, FL 32174-9169					世紀
	(City	State and Zip Code	2)		
simslar@gmail.com					
E-mail address:	(to be used for f	uture annual report	notification	1)	ni c.
For further information concerning this ma	tter, please call:				7
G Larry Sims		386 at	5	405-6046	
(Name of Com	act Person)			(Daytime Telep	none Number)
Enclosed is a check for the following amou	int made payable	to the Florida Depa	artment of	State:	
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Mailing Address		Street	Address		

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Documer)	nt Number of Corpora	tion (if Immun)	
(Documer	ii Number of Corpora	non (ii known)	
ursuant to the provisions of section 617.1006, Florid nendment(s) to its Articles of Incorporation:	a Statutes, this Florid	la Not For Profit Corporation adopts	the following
. If amending name, enter the new name of the c	orporation:		
nme must be distinguishable and contain the word "e	corneration" on "inc.	amanad" and a black in the	The new
Company" or "Co." may not be used in the name.	corporation or inco	orporatea or the appreviation "Corp.	." or "Inc."
. Enter new principal office address, if applicable			
Principal office address MUST BE A STREET ADD	<u>::</u> DRESS)		
F-ton non-million address to			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	DX)		
	<u> </u>		
		 	(f)
			<u></u> 2.Ω
If amending the registered agent and/or register	red office address in	Florida ontantha name - 54h	11.
new registered agent and/or the new registered	office address:	riorida, enter the name of the	<u> </u>
Name of New Registered Agent:			, ,
	· · · · · · · · · · · · · · · · · · ·	(Florida street address)	
New Registered Office Address:		With the street datessy	٢
		Divide	
	(City)	, Florida (Zip Code)	_
w Registered Agent's Signature, if changing Regi		. ,	
ereby accept the appointment as registered agent.	istered Agent: I am familiar with and	d accept the obligations of the position	,
5 6	,	The position	•
		v 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 - Trustec; 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	\overline{V} Mik	<u>i Doc</u> e Jones y Smith	
Type of Action (Check One)	Title	Name	Address
1) Change Add	.PD_	Robert Michael Foley	Ormond Beach, FL 32174
Remove 2) Change Add	PD_	Jason R Hefner	1035 W Granada Blvd Ormond Beach, FL 32174
Remove 3) Change Add Remove			
4) Change Add			SECON LIVE
Remove 5) Change Add			<u> </u>
Remove 6) Change			THE STATE OF
Add			
E. If amending or a (attach additional		Articles, enter change(s) here: v). (Be specific)	

	
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	JH 26 MH 9: 08 ETHING STATE LUMBY SECURIT
	9.
	FAT 08
	Lij
lune 7 2023	
The date of each amendment(s) adoption: June 7, 2023 date this document was signed.	, if other than the
Effective date if applicable:	
Effective date <u>if applicable</u> : too more than 90 days after amendment file days	ne)
Note: If the date inserted in this block does not meet the applicable statutory filing requi document's effective date on the Department of State's records.	rements, this date will not be listed as the

(CHECK ONE)

■ The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s)

Adoption of Amendment(s)

was/were sufficient for approval.

Secretary

(Title of person signing)

SECRETARY OF STATE