719452

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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C. GOLDEN NOV 1 4 2018

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	THE PENTE DISTRICT,		H OF GOD OF AME	RICA, FLORIDA	
	·	1			
DOCUMENT NUMBER:	719452		<u> </u>		
The enclosed Articles of Amendme	ent and fee are subn	itted for filing.			
Please return all correspondence co	ncerning this matter	to the following:			
ANDREW HIGGINBOTHAN					
		(Name of Contact Perso	n)		
LABELLE CPA PA					
 .		(Firm/ Company)			
PO BOX 1466					
		(Address)			
LABELLE FL 33975		(V. 10	<u> </u>		
	•	City/ State and Zip Coc	le)		
ANDY@LABELLECPA.COM	1				
E-mail a	ddress: (to be used	for future annual report	notification)		
For further information concerning	this matter, please o	call:			
ANDREW_HIGGINBOTHAN (Name	1 of Contact Person)	at(;	863.) 	phone Number)	
Enclosed is a check for the following					
· ·	3.75 Filing Fee & Unificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy	PREVIOUSLY SUBMITTED	
		enclosed)	(Additional Copy is Enclosed)		
Mailing Address			Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
P.O. Box 6327			ı Building		

2661 Executive Center Circle

Tallahassee, FL 32301



October 29, 2018

ANDREW HIGGINBOTHAM POST OFFICE BOX 1466 LABELLE, FL 33975

SUBJECT: THE PENTECOSTAL CHURCH OF GOD OF AMERICA, FLORIDA

DISTRICT, INC.

Ref. Number: 719452

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please list the street address of each officer/director.

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.

Claretha Golden Regulatory Specialist II

Letter Number: 918A00022273

POLBWOY - 1 M 9: 19
TOUR WOY - 1 M 9: 19
FORETHEN SEE: THE

Resubmitted 11/5/18

Labelle CPA

CERTIFIED PUBLIC ACCOUNTANTS
PO. BOX 1466

LABELLE, FL 33975-1466



October 1, 2018

ANDREW HIGGINBOTHAM POST OFFICE BOX 1466 LABELLE, FL 33975

SUBJECT: THE PENTECOSTAL CHURCH OF GOD OF AMERICA, FLORIDA

DISTRICT, INC.

Ref. Number: 719452

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Claretha Golden Regulatory Specialist II

Letter Number: 618A00020342

RECEIVED

SECRETARY OF STATE TALL AND SSEE, FL

Articles of Amendment Articles of Incorporation

		INC. 195
A est	ticles of Amendment	2010
Art	to	10 1
Arti	icles of Incorporation	47
	of	
	OF AMERICA, FLORIDA DISTRICT,	INC. 7
(Name of Corporation as cur	rently filed with the Florida Dept. of State)	.,
9452		
(Document Nu	umber of Corporation (if known)	
nt to the provisions of section 617,1006, Florida Stament(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation adopts the	e following
amending name, enter the new name of the corpo	ration:	
A		The new
must be distinguishable and contain the word "corporary" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp."	or "Inc."
ter new principal office address, if applicable:	N/A	
pal office address <u>MUST BE A STREET ADDRE.</u>	(<u>22</u>	
nter new mailing address, if applicable:		
ailing address MAY BE A POST OFFICE BOX)	PO BOX 12050	
	BROOKSVILLE FL 34603	
	•	
mending the registered agent and/or registered c		
v registered agent and/or the new registered office	ce address:	
Name of New Registered Agent: N/	A	
	(Florida street address)	
New Registered Office Address:		-
•		
	(City) (Zip Code)	
egistered Agent's Signature, if changing Register by accept the appointment as registered agent. I an	red Agent: n familiar with and accept the obligations of the position.	
	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	PT John Doe Y Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	SD GROSS, JAMES BAILEY	5254 17TH STREET
Add		ZEPHYRHILLS, FL 33542
X Remove		
2) Change	PD DENTON, BILLY J	37041 MERRIDIAN AVE
Add		DADE CITY, FL 33526
X Remove		
3) X Change	PD HOWARD, LEMUEL W. DR.	PO_BOX_392
Add		LABELLE-FL-33975-
Remove		
4) Change	VD NAIL, LEON DR.	4516 SEAGULL DR #513
<u>x</u> Add		NEW PORT RICHEY, FL
Remove		3.4.6.5.2
5) Change	SD STILES, CARL REV.	3301 CLEMONS RD
<u> </u>		P <u>LANT CITY, FL 3356</u> 6-0917
Remove		
6) Change		
Add		
Remove		

If amending or adding additional As attach additional sheets, if necessary)	(Be specific)						
N/A							
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	te this document was signed.	, if other than the
	fective date if applicable:	
	(no more than 90 days after amendment file date)	
loc	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not cument's effective date on the Department of State's records.	be listed as the
۱d	option of Amendment(s) (<u>CHECK ONE</u>)	
X	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 OCTOBER 22, 2018	
	Signature 111 Lowas	_
	(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)	
	L_W_HOWARD(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	