719616

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08 DEC -2 AM 9: 0

SECRETARY OF STATE DIVISION OF CORPORATIONS

Amend (12/3/08

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION: Presbyter	ian Chu	rch of Sebring	Inc.
DOCUMENT NUMBE	R:7196	516		
The enclosed Articles of	Amendment and fee	are submi	tted for filing.	
Please return all correspo	ndence concerning th	is matter	to the following:	
Dan	rell A. Peer	_		
	(Name	of Contact	Person)	
Pre	sbyterian Church	of Seb	ring, Inc.	
	(Fi	irm/ Compa	ny)	
319	Poinsettia Aven	ue		
		(Address)		
Seb	ring, Florida 33	870		·
	(City/ S	State and Zip	Code)	
For further information co	ncerning this matter,	please ca	11:	
Darrell A. Peer		at (863) 38	5-0107
(Name of Con	act Person)			ime Telephone Number)
Enclosed is a check for th	e following amount n	nade paya	ble to the Florida I	Department of State:
	43.75 Filing Fee & Pertificate of Status	Co (A	3.75 Filing Fee & ertified Copy dditional copy is nclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee FI 32	rations	Ame Divi Clift	et Address Indment Section Is on of Corporation In Building Executive Center	

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 17, 2008

DARRELL A. PEER PRESBYERIAN CHURCH OF SEBRING, INC. 319 POINSETTA AVENUE SEBRING, FL 33870

SUBJECT: PRESBYTERIAN CHURCH OF SEBRING, INC.

Ref. Number: 719616

We have received your document for PRESBYTERIAN CHURCH OF SEBRING, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 408A00057361

* RETURNING WITH CHANGED

RECEIVED

BDEC-2 AM 8: 01

CRETARY OF STATE

Paster Davill Peur

Articles of Amendment to . Articles of Incorporation of

If amending name, enter the new name of the corporation: If a mending name, enter the new name of the corporation: If a mending name, enter the new name of the corporation: If a mending name, enter the new name of the corporation: If a mending name, enter the new name of the corporation: If a mending name, enter the new name of the corporation: If a mending name of the corporation: If a mending name, enter the n	Traine of Corporation as earle	ently filed with the Florida Dep	t. of State)
ersuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation e following amendment(s) to its Articles of Incorporation: If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation" or "incorporated" or the observation "Corp." or "Inc." "Company" or "Co." may not be used in the name. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS (Mailing address MAY BE A POST OFFICE BOX) 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:	7196	616	E
If amending name, enter the new name of the corporation: If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation" or "incorporated" or the observation "Corp." or "Inc." "Company" or "Co." may not be used in the name. Enter new principal office address, if applicable: Trincipal office address MUST BE A STREET ADDRESS Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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:	(Document Num	nber of Corporation (if known)	
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:			t For Profit Corporation
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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:	If amending name, enter the new name of	the corporation:	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 address:	ne new name must be distinguishable and co breviation "Corp." or "Inc." <u>"Company" or</u>	ontain the word "corporation" or "Co." may not be used in the n	or "incorporated" or the ame.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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:			
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new registered agent and/or the new registered office address:	•		
new registered agent and/or the new registered office address:			
			da, enter the name of the
Name of New Registered Agent:		tered office address:	
	Name of New Registered Agent:		
New Registered Office Address: (Florida street address)	New Registered Office Address:	(Florida street address)
, Florida,		(0)	, Florida
(City) (Zip Code)	· _		(Zin L'oda)

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)

JOSEPH BAILEY	9120 CR 17 SOUTH SEBRING, FL 33876		Add Remove
JOHN W. SCHROEDER	1616 VILLAWAY W SEBRING, FL 33876		Add Remove
			Add Remove
ing or adding additional Articles, en	nter change(s) here:		
mional sneets, y necessary). (De sp		<u>.</u>	
	·		
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	john W. SCHROEDER ing or adding additional Articles, enditional sheets, if necessary). (Be specific property).	JOHN W. SCHROEDER 1616 VILLAWAY W SEBRING, FL 33876 ing or adding additional Articles, enter change(s) here: ditional sheets, if necessary). (Be specific)	JOHN W. SCHROEDER 1616 VILLAWAY W SERRING, FL 33876 Gradding additional Articles, enter change(s) here: ditional sheets, if necessary). (Be specific)

The date of each amendmen	
Effective date if applicable:	11/1/08
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or radopted by the board of dir	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated	u/9/68
Signature	
/ hav	the chairman or vice chairman of the board, president or other officer-if directors e not been selected, by an incorporator – if in the hands of a receiver, trustee, our court appointed fiduciary by that fiduciary)
	LYNN F. PARSONS
	(Typed or printed name of person signing)
4	Rym F. Pursons
	(Title of person signing)
	SECRETARY OF THE CORROLL

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