723397

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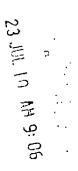




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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

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NAME OF CORPORATION: PENTECOSTAL C	HURCH OF GOD IN	CHRIST OF	THE UNITED STATES OF AMERI
DOCUMENT NUMBER:	,		
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this ma	tter to the following:		
RANDY HIGHTOWER			
	(Name of Contact P	erson)	
	(Firm/ Compan	y)	
528 CHEERFUL STREET			
	(Address)		
WEST PALM BEACH FLORIDA 33407			
	(City/ State and Zip	Code)	
CROWNHIM5428@GMAIL.COM			
E-mail address: (to be use	ed for future annual re	port notification	n)
For further information concerning this matter, pleas	se call:		
RANDY HIGHTOWER	at	561	832-8998
(Name of Contact Perso			(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida	Department of	State:
■ \$35 Filing Fee □\$43,75 Filing Fee & Certificate of Status	——————————————————————————————————————	Certif s Certif	D Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ar Di	reet Address nendment Sect vision of Corpo ne Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

PENTECOSTAL CHURCH OF GOD IN CHRIST OF THE UNITED STATES OF AMERICA, INC.

723397		
(Document Nur	nber of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statimendment(s) to its Articles of Incorporation;	autes, this Florida Not For Profit Corporation adopts the	following
A. If amending name, enter the new name of the corpor	ration:	
NA .		The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbreviation "Corp." o	
3. Enter new principal office address, if applicable:	NA	
Principal office address MUST BE A STREET ADDRES	<u>(X</u>)	
		_ .
Enter new mailing address, if applicable:	NA	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	<u> </u>	
	(Geo address in Florida, onter the name of the	
) If amonding the registered agent and/or registered of		
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 		
new registered agent and/or the new registered office		
new registered agent and/or the new registered office		23
new registered agent and/or the new registered office Name of New Registered Agent: NA		23 JUL
new registered agent and/or the new registered office	e address:	23 JUL 10
new registered agent and/or the new registered office Name of New Registered Agent: NA	e address: (Florida street address) , Florida	23 JUL 10 1
new registered agent and/or the new registered office Name of New Registered Agent: NA	e address: (Florida street address)	23 JUL 10 AM S
new registered agent and/or the new registered office Name of New Registered Agent: NA	(Florida street address) (Florida =	23 JUL 10 KM 9: UB

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 tollowing 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 De V Mike Jo SV Sally Si	nes	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	<u>D</u>	WILLIE MAE LEE	4020 SW HALCOMB STREET PORT ST. LUCIE, FL 34953
x Remove			
2) Change Add	<u>D</u>	CORALETHA JOHNSON	5428 SE RAILWAY AVENUE PORT SALERNO, FL 34997
Remove 3) Change Add Remove			
4) Change Add			
Remove 5)ChangeAdd			
Remove 6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
NA			
			<u> </u>
			<u> </u>

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The date of each amendment(s) adoptio date this document was signed.	n: <u>06/16/2023</u>	, if other than the
Effective date if applicable: 06/16/202		
	(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block do document's effective date on the Departm	es not meet the applicable statutory filing requirements, this date will not bent of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

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 6/29/2023
Signature (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)
DONNA BAILEY
(Typed or printed name of person signing)
Treasurer
(Title of person signing)