## 730486

| (F                     | Requestor's Name)    |           |
|------------------------|----------------------|-----------|
| .,                     | Address)             |           |
| ((                     | City/State/Zip/Phone | #)        |
| PICK-UP                | ☐ WAIT               | MAIL      |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

| NAME OF CORPORATION:                              | pust Church of Clewiston     | , INC                           |  |
|---|------------------------------|---------------------------------|--|
| 730486<br>DOCUMENT NUMBER:                        |                              |                                 |  |
| The enclosed Articles of Amendment and fed        | e are submitted for filing.  |                                 |  |
| Please return all correspondence concerning       | this matter to the following | ng:                             |  |
| David Royal                                       |                              |                                 |  |
|   | (Name of Conta               | ct Person)                      |  |
| Victory Baptist Church of Clewiston, INC          |                              |                                 |  |
|   | (Firm/ Con                   | pany)                           |  |
| 705 South Olympia Street                          |                              |                                 |  |
|   | (Addres                      | ss)                             | <del> </del>   |
| Clewiston, FL 33440                               |                              |                                 |  |
|   | (City/ State and             | Zip Code)                       |  |
| davidroyal@gladesbiblechurch.com                  |                              |                                 |  |
| E-mail address: (t                                | o be used for future annua   | al report notification          | on)  |
| For further information concerning this matte     | er, please call:             |                                 |  |
| David Royal                                       |                              | 561<br>at                       | 261-3710   |
| (Name of Contact                                  | ct Person)                   | (Area Code)                     | (Daytime Telephone Number)                                     |
| Enclosed is a check for the following amount      | t made payable to the Flo    | rida Department o               | f State:   |
| ☐ \$35 Filing Fee ☐ \$43.75 Filing Certificate of |                              | y Certi<br>opy is Certi<br>(Add | 50 Filing Fee ficate of Status fied Copy itional Copy is osed) |
| Mailing Address Amendment Section                 |                              | Street Address Amendment Sec    | tion   |

Division of Corporations
The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

Victory Baptist Church of Clewiston, INC

| (Name of Corporation as currently filed with the   | e Florida L   | Dept. of State)                     |                            |              |
|--|---------------|-------------------------------------|----------------------------|--------------|
| 730486   |               |                                     |                            |              |
| (Docum   | nent Numb     | er of Corporation (if known)        |                            |              |
| Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation: | orida Statute | es, this Florida Not For Profit Cor | <i>poration</i> adopts the | following    |
| A. If amending name, enter the new name of the   | e corporat    | ion:                                |                            |              |
| Glades Bible Church of Clewiston, Inc.   |               |                                     |                            | _The new     |
| name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam    |               | tion" or "incorporated" or the abb  | previation "Corp."         | or "Inc."    |
| B. Enter new principal office address, if applica  | ible:         | N/A                                 |                            |              |
| (Principal office address MUST BE A STREET A   |               | N/A                                 |                            |              |
|  |               | N/A                                 |                            | <del>-</del> |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)                | <u>BOX</u> )  | N/A                                 |                            |              |
|  |               | N/A                                 |                            | _            |
|  |               | N/A                                 |                            |              |
| D. If amending the registered agent and/or reginew registered agent and/or the new register        |               |                                     | ame of the                 |              |
|  | N/A           | <del></del>                         |                            |              |
| Name of New Registered Agent:  | N/A           |                                     | <del></del>                |              |
| <u>New Registered Office Address:</u>  |               | (Florida street ado                 | iress)                     |              |
| HEN REGISTERED OFFICE HULLESS.   | N/A           |                                     | N/A                        |              |
|  |               | (City)                              | , Florida<br>(Zip Code)    | <del></del>  |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen   |               |                                     | ons of the position.       | 7021 Kay - 7 |
|  | Si            | gnature of New Registered Agent,    | if changing                | - 7          |
|  |               |                                     |                            |              |

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 Do<br>V Mike Jo<br>SV Sally Sr | <u>ones</u> |                 |  |
|---|--|-------------|-----------------|--|
| Type of Action (Check One)  | <u>Title</u>                           | Name        | <u>Addres</u> s |  |
| 1) N/A Change   |  |             |                 |  |
| N/A Remove  |  |             | <del></del>     |  |
| 2) N/A Change   |  |             |                 |  |
| 3) N/A Remove Change N/A Add N/A Remove   |  |             |                 |  |
| 4) N/A Change   |  |             |                 |  |
| N/A Remove  |  |             | <u></u>         |  |
| 5) N/A Change N/A Add   |  |             |                 |  |
| N/A Remove  |  |             |                 |  |
| 6) N/A Change   |  |             |                 |  |
| N/A Remove  |  |             |                 |  |
| E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) |  |             |                 |  |
| N/A   |  |             |                 |  |
|   |  |             |                 |  |
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| The date of each amendment(s) adoption: date this document was signed.  | , if other than the   |
|   |   |
| Effective date if applicable: 05/05/2021  |   |
| (no more than 90  | ays after amendment file date)  |
| Note: If the date inserted in this block does not meet the approximent's effective date on the Department of State's reco | icable statutory filing requirements, this date will not be listed as the |

Adoption of Amendment(s) (CHECK ONE)

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 05/03/2021   |
| Signature  (By the maight of 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)  Toffice L. Roya  (Typed or printed name of person signing)   |
| Director   |

(Title of person signing)