

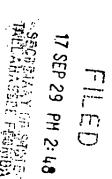
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And)
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September 14, 2017

THE REV. JAMES SHEVLIN 200 NW 3RD ST OKEECHOBEE, FL 34972

SUBJECT: THE CHURCH OF OUR SAVIOUR (EPISCOPAL) INC,

Ref. Number: 733717

We have received your document for THE CHURCH OF OUR SAVIOUR (EPISCOPAL) 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):

Page 4 is missing from the document. Please find enclosed the missing document.

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.

Rebekah White Regulatory Specialist II

Letter Number: 617A00018709

17 SEP 29 BUS 11
DEPARTMENT STATE
DEPART

## **COVER LETTER**

Division of Corporations
SUBJECT: (hurch of our Spujour (Episcopal) Inc. Name of Corporation
DOCUMENT NUMBER: 733717
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  Acticles of Meand mend  Please return all correspondence concerning this matter to the following:
The Rev. Tanes Sheulin Name of Contact Person
Church of our Saviour Firm/Company
200 NW 3 LD Street Address
OKeechobee FL. 34972 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Father Jin Sheulin at (687) 624-1476  Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

FILED 17 SEP 29 PH 2: 48

	of	
Church of Our	Saviour (f	Epis copal Market 18 1 08 5
(Name of Corresponding as cu		orida Dept. of State)
733717		
(Document N	Number of Corporation (if	known)
dursuant to the provisions of section 617.1006, Florida Simendment(s) to its Articles of Incorporation:	tatutes, this Florida Not F	or Profit Corporation adopts the following
If amending name, enter the new name of the corp	oration:	
		The new
name must be distinguishable and contain the word "cor Company" or "Co." may not he used in the name.	poration" or "incorporate	ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRE	<u>ESS</u> )	
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
If amending the registered agent and/or registered new registered agent and/or the new registered off		s, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(	Florida street address)
	(Cit.)	Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I a		n the obligations of the position.
	Signature of New Regi	stered 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 V W Mike SV Sally		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
Change Add Remove	_D	Howard Bangert	1588 Sw 35th Circle Okechabee, FL 34974
2) Change	<u>D</u>	Christine Fuller	1515 Sw 18th Terrace Okeechober, FL 34974
Remove 3 ) Change Add			
Remove 4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

	date of each amendment(s) adoption: this document was signed.	<del>"V"A</del>	if other than the
Effe	ective date <u>if applicable</u> :	o more than 90 days after amendment file	e date)
	e: If the date inserted in this block does ument's effective date on the Department		quirements, this date will not be listed as the
Ado	option of Amendment(s) (	CHECK ONE)	
	The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes ca	ist for the amendment(s)
Ø	There are no members or members entity adopted by the board of directors.	led to vote on the amendment(s). The an	nendment(s) was/were
	Dated Sept. 25,	2017	
	Signature	2 July 1	
	have not been select	ice chairman of the board, president or of d, by an incorporator – if in the hands of I fiduciary by that fiduciary)	
	Pam	ela Schaefer	
	Trea	(Typed or printed name of person s	agning)
		(Title of person signing	<u> </u>