

735047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Grace Presbyterian Church of Ocala, Inc.

DOCUMENT NUMBER: 735047

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sherrill Taylor

(Name of Contact Person)

Grace Presbyterian Church

(Firm/ Company)

2255 SE 38th Street

(Address)

Ocala FL 34480

(City/ State and Zip Code)

grace@graceocala.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sherrill Taylor

at

352

629-1537

(Name of Contact Person)

(Area Code)

(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

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed)

CHECK #11279
WAS ALREADY
SENT ON 8/16/19

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
of

Grace Presbyterian Church of Ocala, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

735047

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

D. 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:

Name of New Registered Agent:

Jonathan David Connor

5251 NW 49th Avenue

(Florida street address)

New Registered Office Address:

Ocala

(City)

Florida 34482

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am 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 the 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; CO = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 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. If a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT; Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u> </u> Change	<u>TD</u>	<u>Roger Kilbourne Gilmore</u>	<u>4302 SW 57th Avenue</u>
<u> </u> Add			<u>Ocala, FL 34474</u>
<u>X</u> Remove			
2) <u> </u> Change	<u>PD</u>	<u>Peter Michael Jensen</u>	<u>7145 S. Magnolia</u>
<u> </u> Add			<u>Ocala, FL 34476</u>
<u>X</u> Remove			
3) <u> </u> Change	<u>PD</u>	<u>Jonathan David Connor</u>	<u>5251 NW 49th Avenue</u>
<u>X</u> Add			<u>Ocala, FL 34482</u>
<u> </u> Remove			
4) <u> </u> Change	<u>TD</u>	<u>Bradley Paul Broersma</u>	<u>3620 SE 48th Street</u>
<u>X</u> Add			<u>Ocala, FL 34480</u>
<u> </u> Remove			
5) <u> </u> Change			
<u> </u> Add			
<u> </u> Remove			
6) <u> </u> Change			
<u> </u> Add			
<u> </u> Remove			

19 OCT - 7 AM 9:45
 STATE OF FLORIDA
 SECRETARY OF STATE

N/A

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August 6, 2019

The date of each amendment(s) adoption: _____, if
date this document was signed.

August 6, 2019

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be the document's effective date on the Department of State's records.

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 10/2/2019

Signature Jonathan D. Connor

(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)

Jonathan David Connor

(Typed or printed name of person signing)

President of the Corporation

(Title of person signing)

19 OCT -7 AM 9:45
STOCK MARKET
FALL 2019