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A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:		rship Center of Sout	h Florida, Inc.	d/b/a The Oasis Miami
	678			
The enclosed Articles of Amend	Iment and fee are subm	nitted for filing.		
Please return all correspondence	concerning this matter	to the following:		
JOE M. GRANT, ESQ.				
	(Name of Contact Pe	erson)	
MARSHALL SOCARRAS GR	ANT, P.L.			
		(Firm/ Company	<i>'</i>)	
197 S. FEDERAL HIGHWAY,	SUITE 300			
		(Address)		
BOCA RATON, FL 33432				
	(1	City/ State and Zip	Code)	
EFILE@MSGLAW.COM				
E-ma	l address: (to be used f	for future annual rep	ort notification)
For further information concerni	ng this matter, please ca	all:		
JOE M. GRANT		at	561	361-1000
(Na	me of Contact Person)	u.		(Daytime Telephone Number)
Enclosed is a check for the follow	ving amount made paya	able to the Florida I	Department of S	State:
	\$43.75 Filing Fee & C Certificate of Status		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

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

FILED

CHRISTIAN FAMILY WORSHIP CENTER OF SOUTH FLORIDA, INC.

2115 JUN 23 PM 3: 46

		Esta Com
(Name of Corporation as	currently filed with the Florida Dep	t. of State)
737678		A STREET
(Documen	nt Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not For Profit	Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" or "incorporated" or the	abbreviation "Corp." or "Inc."
Company of Co. may not be used in the name.		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	e: DRESS)	
. This put office that soo in the second of		
		•
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	Y 1	
(Mulling unitess MAT DE AT OST OFFICE BO.	<u> </u>	

D. If amending the registered agent and/or register	ed office address in Florida, enter th	e name of the
new registered agent and/or the new registered		e name of the
Name of New Registered Agent:		
	(Florida street	address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi	stered Agent:	
hereby accept the appointment as registered agent.	l am familiar with and accept the obliga	ations of the position.
<u></u>		
•	Signature of New Registered Ages	nt, 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 A Add	<u>V</u> <u>M</u>	hn Doe ike Jones ally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	EVELYN SIMPSON	27500 OLD DIXIE HWY
Add			NARANJA, FL 33032
X Remove			
2) Change	<u>D</u>	DEBORAH MERCER	27500 OLD DIXIE HWY
Add			NARANJA, FL 33032
X Remove			
3)Change	D	LUIS RAVELO	27500 OLD DIXIE HWY
Add			NARANJA, FL 33032
X Remove			
4) Change	P	TRAVIS JOHNSON	27500 OLD DIXIE HWY
X Add			NARANJA, FL 33032
Remove			
5) Change	D	JAMES NELSON	27500 OLD DIXIE HWY
X Add			NARANJA, FL 33032
Remove		•	,
6) Change	D	DANIEL BARD	27500 OLD DIXIE HWY
X Add	**************************************		NARANJA, FL 33032
Remove			

(attach d	idditional she	ets, if necessary). (Be specifi	c)
ADD	D	JOHN T. JOHNSON	27500 OLD DIXIE HWY, NARANJA, FL 33032
ADD	D	CLAUDE CONDO	27500 OLD DIXIE HWY, NARANJA, FL 33032

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E. If amending or adding additional Articles, enter change(s) here:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	-
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 dat document's effective date on the Department of State's records.	e 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 was/were sufficient for approval.	ent(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/we adopted by the board of directors.	ere
Dated 06/19/15	
Signature	
(By the chairman or vice chairman of the board, president or other officer-if direct have not been selected, by an incorporator – if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	.
(Typed or printed name of person signing)	
(Title of person signing)	