## 737826

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

GR NAME OF CORPORATION:		LOWSHIP OF ST.	PETERSBU	RG, INC.	
DOCUMENT NUMBER:			1		
The enclosed Articles of Amendmen	t and fee are subn	nitted for filing.			
Please return all correspondence con-	cerning this matte	r to the following:			
URIAN RIOS					
4		(Name of Contact P	erson)		
GRACE BIBLE FELLOWSHIP OF	ST. PETERSBU	RG, INC.			
		(Firm/ Compan	y)	•	-
10999 - 60TH ST., NORTH					
<del>"</del>		(Address)			
PINELLAS PARK, FL 33782					
·-	•	(City/ State and Zip	Code)		
URIANRIOS@OUTLOOK.COM			•		
E-mail ad	dress: (to be used	for future annual re-	port notifica	tion)	
For further information concerning the	nis matter, please	call:			
URIAN RIOS		at	727	225-8599	
(Name c	of Contact Person			e) (Daytime Teleph	ione Number)
Enclosed is a check for the following	; amount made pa	yable to the Florida	Department	of State:	
	75 Filing Fee & ificate of Status	S43.75 Filing Fee Certified Copy (Additional copy enclosed)	Ce is Ce (A	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy is nclosed)	
Mailing Address		St	reet Addres	<u>ss</u> .	

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

## Articles of Amendment to Articles of Incorporation of

GRACE BIBLE FELLOWSHIP OF ST. PETERSBURG, INC.

(Name of Corporation as current	tly filed with the Florida Dept. of State)
737826	
(Dogument Number	er of Corporation (if known)
(Document Number	of Corporation (II known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	on:
The state of the s	
	The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp." or "Inc."
D. Enter your reliable office address if applicables	1
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
Trincipal office and the month be not the nation of the national factors and the national factors are not as a factor of the national factors and the national factors are not as a factor of the national factors and the national factors and the national factors are not as a factor of the national factors and the national factors are not as a factor of the national factors and the national factors are not as a factor of the national factors and the national factors are not as a factor of the national factors and the national factors are not as a factor of the national factors and the national factors are national factors and the national factors are not as a factor of the national factors are not as a factor of the national factors are not as a factor of the national factors are not as a factor of the national factors are not as a factor of the national factors are not as a factor of the national factors are not as a factor of the national factors are not as a factor of the national	•
C. Catanan and the state of the bill	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5894 96th Circle N
manning and the same state of	Finellas Park, FL 33782
D. If amending the registered agent and/or registered offic	
new registered agent and/or the new registered office a	ddress:
Name of New Registered Agent:	1
Admit by New Neglitera ngent.	
N. B. C. LOW CH	(Florida street address)
New Registered Office Address:	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	
I hereby accept the appointment as registered agent. I am fan	niliar with and accept the obligations of the position.
Si	gnature 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 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	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>T</u>	VICKI BUTLER	125 150TH AVENUE
Add			MADEIRA, FL 33708
X Remove			
2) Change	<u>T</u>	CORTLYN PENCE	2333 FEATHER SND DR #B406
X Add			CLEARWATER, FL 33762
Remove			
3) Change		LEMUEL COUSINS	125 150TH AVENUE
Add			MADEIRA BEACH, FL 33708
X Remove			
4) Change			
Add			
Remove		·	
5) Change			
Add			<del></del>
Remove			
6) Change			<del></del>
Add			
Remove			

. <u>If amending or adding additional Articles, enter change(s) here:</u> (attach additional sheets, if necessary). (Be specific)	
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	J.

The date of each amendment(s) addate this document was signed.	loption:	, if other than the
 Effective date <u>if applicable</u> :		· ·-
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo locument's effective date on the De	eck does not meet the applicable statutory filing requirements, this date will repartment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s) al.	
There are no members or members adopted by the board of directors	pers entitled to vote on the amendment(s). The amendment(s) was/were prs.	
Dated 07/23/2017		
	in- D Cunnoley	
have not bee	man or vice chairman of the board, president or other officer-if directors en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
William .	J. Connolly	
	(Typed or printed name of person signing)	
PRESIDI	ENT - CHAIRMAN	
<u> </u>	(Title of person signing)	