743938

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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Florida Bible Camp, Inc.
DOCUMENT NUMBER: 743938
The enclosed Articles of Amendment and fee are submitted for filing. $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
Please return all correspondence concerning this matter to the following:
The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: = Mailing Oneg Edwards Mail Jaddresses and email of the following: addresses (Name of Contact Person) Mailing The person Mailing and email of the following: Mailing and email of the following: addresses (Name of Contact Person)
ally to be Florida Bible Camp, Inc. itself.
regard to (Firm/Company)
this parti- cular matter POBOX 187 (Address)
generalions * Lake Butler, FL 32054
Ness (City/State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
<u>Megan Swilley</u> (Name of Contact Person) at (386) 433-0027 (Area Code) (Daytime Telephone Number)
(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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is

Mailing Address Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Enclosed)

A	rticles of Amendment
Ап	to ticles of Incorporation
Florida Bib (Name of Corporation as currently filed with the Flore	le Camp. Inc.
(Name of Corporation as currently filed with the Flor 743	ida Dept. of State) 938
	lumber of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Si amendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp A / A	
name must be distinguishable and contain the word "cor	poration " or "incorporated" or the abbreviation "Corp." or "Inc."
<u>"Company" or "Co." may not be used in the name.</u>	XICA
B. <u>Enter new principal office address</u> , if <u>applicable</u> : (Principal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</u>)
C. <u>Enter new mailing address, if applicable:</u> (Mailing address MAY BE A POST OFFICE BOX)	NIA
(muning under an <u>marin marin and an an an an an an</u>	
D. If amending the registered agent and/or registered	toffice address in Florida, enter the name of the
new registered agent and/or the new registered off	fice address:
	NIA
Name of New Registered Agent:	
<u>Name of New Registered Agent:</u>	N/H
<u>Name of New Registered Agent:</u>	(Florida street oddress)
	NIA Florida NIA
<u>New Registered Office Address</u> :	(City) (City) (City) (City)
<u>New Registered Office Address</u> : 	(City) (City) (City) (City)
<u>New Registered Office Address</u> : 	City) Florida <u>NA</u> (City) (Zip Code) (City) (Zip Code) (City) (Zip Code) (City) (Zip Code)
<u>New Registered Office Address</u> : 	N/A Florida N/A (City) (Zip Code) Gered Agent: (Zip Code) Im familiar with and accept the obligations of the position. (City) N/A (City)
<u>New Registered Office Address</u> : 	N/A Florida N/A (City) (Zip Code) tered Agent: Im familiar with and accept the obligations of the position. N/A N/A 1 Signature of New Registered Agent, if changing 1
<u>New Registered Office Address</u> : 	N/A Florida N/A (City) (Zip Code) Gered Agent: (Zip Code) Im familiar with and accept the obligations of the position. (City) N/A (City)

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> John Dc V Mike Jo SV Sally Sı	uneş	
Type of Action (Check One)	Title	Name	Address
1) Change Add		NIA	
2) Remove 2) Change Add		NIA	
3) Remove Add Remove		NIA	
4) Change Add		NIA	
5) Remove		NIA	
6) Remove 6) Change Add		NIA	
E. If amending or addi (attach additional she		icles, enter change(s) here: (Be specific)	
	, <u>,</u> , , , , , , , , , , , , , , , , ,		

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'rst letter of "church" should be case amende the foll ease not e ina OLA දෙය ticles d Obeginning 6/1 SEL CLASS 50 00 members \mathcal{O} 10 ec ONS. CON oorat ON a les Q of 1P5 27 2h OV `S mbers MQ 05 O ıЛ stand 9000 IL e ೭ WI \circ av ina when e. WONS egation CON ectors 01 \leq 001 ooraIOLA no SUAL 1 al hatsoev COM easse Ov 5 100 19 an 07 oet Men 1.0 any winding Or NO corporation ector Dir POrat 100, 01 5 'C Sonally 51 e lig NO a ties, or ъS obliga N ion, and shall SUL CON porat ec 10 any assessmen (two) sl Une. 1Se. See eiterated Articles Ithron rended 2020 JUNE ł if other than the The date of each amendment(s) adoption: date this document was signed.

Effective date if applicable:

(no more than 90 days after amendment file date)

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 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.

D There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

6/13/2020 Dated

Signature

(By the chairman or wice 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)

Greg Edwards (Typed or printed name of person signing)

Treasurer (Title of person signing)