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2017 DFC -8 F.E 4: 36

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	First Church of the N	lazarene of Winter H	laven, Florida,	Inc.
7472	35			
DOCUMENT NUMBER:	<u> </u>		•	
The enclosed Articles of Amenda	nent and fee are subn	nitted for filing.		
Please return all correspondence of	oncerning this matter	r to the following:		
Jean Yongue				
		(Name of Contact Pe	erson)	
First Church of the Nazarene of V	Vinter Haven, Florida	ı, Inc.		
		(Firm/ Company	·)	
244 Ave. D. SW,				
		(Address)		
Winter Haven, Florida, 33880				
	- ((City/ State and Zip (Code)	
jeanyongue@outlook.com				
E-mail	address: (to be used	for future annual rep	ort notification)
For further information concerning	g this matter, please o	all:		
Jean Yongue		at	863	293-0690
(Nam	e of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the follow	ing amount made pay	rable to the Florida I	Department of S	State:
	43.75 Filing Fee & [ertificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi S Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Addre	<u>88</u>	Str	cet Address	

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



December 6, 2017

Amendment Section
Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Dear Sir/Madam,
Enclosed is our check for \$35.
Attached is the Amendment to our corporation,
omitting Charles Davis Treasurer and adding
Gale Guyer as new Treasurer.
Thanking you in advance for your attention

Articles of Amendment Articles of Incorporation of

FILEL

Inc.	2017 DEC -8 PM	4:36
rrently filed with the Flori	da Dept. of State)	
		30 00
umber of Corporation (if kn	own)	
tatutes, this Florida Not For	Profit Corporation adopts the following	
oration:	av.	
poration" or "incorporated	or the abbreviation "Corn" or "Inc"	
N/A		
ESS)		
N/A		
		
P. C. T. L. T. T. L. T.		
office address in Florida, c ice address:	enter the name of the	
(Flo.	rida street address)	
(Circl)	Florida	
(City)	(Zip Code)	
ered Agent:		
m familiar with and accept t	he obligations of the position.	
Signature of New Regists	red depart if changing	
	rrently filed with the Florida fumber of Corporation (if know attutes, this Florida Not Formation: N/A SSS) N/A Office address in Florida, edice address: (Florida fumiliar with and accept to familiar with accept to familiar with and accept to familiar with and accept to familiar with accept to f	rrently filed with the Florida Dept. of State) Jumber of Corporation (if known) attates, this Florida Not For Profit Corporation adopts the following oration: The new poration" or "incorporated" or the abbreviation "Corp." or "Inc." N/A ESS) N/A Office address in Florida, enter the name of the ice address: (Florida street address) Florida (City) Florida (Zip Code)

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 Do V Mike Jo SV Sally St	<u>ones</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	T	Charles Davis	427 Ruby Lake Place
Add			Winter Haven, FL. 33884
x Remove			
2) Change	Т	Gale Guyer	4925 Cypress Gardens Rd. #117
xAdd			Winter Haven, FL. 33884
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Article (attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
N/A	
	
	
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The date of each amendment(s) a late this document was signed.	doption: NA	, if other than the
*	05/2017	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will epartment of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast for the amendment(s) al.	
There are no members or men adopted by the board of direct	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.	
Dated 12/05/2017	7	
Signature	Lasty South M Smith	
have not be	rman 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)	
Pastor E	Oonald M. Smith	
	(Typed or printed name of person signing)	
Presider	ıt.	
 -	(Title of person signing)	