## 747 471

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SECRETARY OF STAIL AHASSEE, FLOSON

## **COVER LETTER**

Mailing Address	Street Address
■ \$35 Filing Fee □\$43.75 Filing Fee of Certificate of State	
Enclosed is a check for the following amount made	
(Name of Contact Per	
Claudette P. Lewis	917- 5414274 at
For further information concerning this matter, ple	ease call:
E-mail address: (to be u	used for future annual report notification)
office@holyfaithp	psl.org / seniorwarden@holyfaithpsl.org
	(City/ State and Zip Code)
Port St. Lucie, 1	Florida 34952
	(Address)
6990 S Federal I	High Way
	(Firm/ Company)
Holy Faith Episc	copal Church
	(Name of Contact Person)
Claudette P. Lew	ris
Please return all correspondence concerning this m	natter to the following:
The enclosed Articles of Amendment and fee are s	submitted for filing.
document number:	- 747471
	PISCOPAL CHURCH, INC.
Division of Corporations	
10: Amendment Section	· · ·

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## **Articles of Amendment** Articles of Incorporation of

HOLY FAITH EPISCOPAL CHURCH, INC.

HOLY FAITH E	EPISCOPAL CHURCH, INC.	7.5
(Name of Corporation as currently filed with the	Florida Dept. of State)	SEC .
6049587456CC	- 747471	語名
(Docum	ent Number of Corporation (if kno	wn) ARY
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes, this <i>Florida Not For i</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	<b>运</b>
name must he distinguishable and contain the word "Company" or "Co." may not be used in the name		The new or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	BOX)	
D. If amending the registered agent and/or registered agent and/or the new registered		nter the name of the
Name of New Registered Ayent:	LEWIS, Claudette P	
	5465 NW Ligon Circle	
New Registered Office Address:	(Flori	da street address)
	Port St. Lucie	34983 , Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent	egistered Agent:  I am familiar with and accept th	e obligations of the position.
_	Signature of New Registers	ed 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	PT John Doe  V Mike Jones SV Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change Add	Register	Lewis, Claudette P	5465 NW Ligon Circle Port St. Lucic, Florida 34983	
<ul> <li>X Remove</li> <li>2) Change</li> <li>Add</li> </ul>	Officer/I	Goodridge, Robert, Priest -in-Charge	Coulter, Starr - Agent  2669 West Brookfield Wav  Vero Beach, Florida 32966	
X Remove 3) Change X Add X Remove	Senior V	Lewis, Claudette P	Highland, Terry, Vicar 5465 NW Ligon Circle Port St. Lucie, Florida 34983 McLeod, Gertrude Seniuor Warder	
4) Change Add	Junior W	Cleary, George	1180 SW Hutchins Street Port St. Lucie, Florida 34983	
Remove  5) Change  × Add	Assistan	Douglas, Jennifer	11385 SW Half Moon Lake N Port St. Lucie, Floorida 34987-5304	
<ul> <li>X Remove</li> <li>6) Change</li> <li>X Add</li> </ul>	<u>Secretar</u>	Seitz, Debra	Coulter, Starr - Treasurer  3828 Sandlace Ct. Port St. Lucie, Florida 34952	
E. If amending or addir (attach additional shee	ets, if necessary).			
George Cical v Ternams	as Junoj warden			
	·			

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ne date of each amendment(s) adoption: _ te this document was signed.	January 15, 2022	, if other than
fective date <u>if applicable</u> :	January 15, 2022	
(no	more than 90 days after amendment file d	ate)

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.
	March 31, 2022
	(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)
	Claudette P. Lewis
	(Typed or printed name of person signing)
	Senior Warden
	(Title of person signing)