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COVER LETTER

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TO: Amendment Section Division of Corporations				
CHRIST'S CHURCH OF THE LIVING GOD				
747708 DOCUMENT NUMBER:	N CORE ,			
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
VALARIE JAMES				
(Name of Contact Person)			
CHRIST'S CHURCH OF THE LIVING GOD				
(Firm/ Company)				
2900 NW 183RD STREET				
(Address)				
MIAMI GARDENS. FLA 33056				
(City/ State and Zip Code	;)			
<u>LCWalk 2002</u> Jahow Con E-mail address: (to be used for future annual report n	notification)			
For further information concerning this matter, please call:				
Valeric James (Name of Contact Person) at <u>305 - 776 - 0887</u> (Area Code) (Daytime Telephone Number)				
Enclosed is dicheck for the following amount made payable to the Florida Depar				
Solution and the following unbound nade payable to the following the object Solution and the following unbound nade payable to the following the object Solution and the following unbound nade payable to the following the object Solution and the following unbound nade payable to the following	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)			
Amendment SectionAmendreDivision of CorporationsDivisionP.O. Box 6327CliftonTallahassee, FL 323142661 Est	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301			

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If amending name, enter the new name of the corporation: Therew If amending name, enter the new name of the corporation: Therew ame must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "incorporated" office address: Enter new mailing address, if applicable: 2900 NW 183RD STREET (Mailing address MAY BE A POST OFFICE BOX) 2900 NW 183RD STREET MIAMI GARDENS, FLA 33056	х I		
Articles of Incorporation of Of OF OF OF OF OF OF OF OF OF OF	Artic		
		es of Incorporation	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following mendment(s) to its Articles of Incorporation:		ntly filed with the	Florid <u>a Dept. of State</u>)
mendment(s) to its Articles of Incorporation:	(Document Num	ber of Corporation	(if known)
"Company" or "Co." may not be used in the name. 8. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS Mia M. Cacdens File Mialing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Poil A MI GARDENS, FLA 33056 MIAMI GARDENS, FLA 33056 Miame of New Registered agent and/or registered office address: Name of New Registered Agent: Vew Registered Office Address: (City) (Florida street address) (City) (Zip Code)	Pursuant to the provisions of section 617.1006, Florida Statu imendment(s) to its Articles of Incorporation:	tes, this <i>Florida No</i>	t For Profit Corporation adopts the following
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS Principal office address MAY BE A POST OFFICE BOX Principal office address MAY BE A POST OFFICE BOX Principal office address MAY BE A POST OFFICE BOX Principal office address MAY BE A POST OFFICE BOX Principal office address MAY BE A POST OFFICE BOX Principal office address MAY BE A POST OFFICE BOX Principal office address in Florida, enter the name of the new registered agent and/or the new registered office address: Principal office Ad	A. <u>If amending name, enter the new name of the corpora</u>	<u>tion:</u>	Thorne
(Principal office address MUST BE A STREET ADDRESS) Miam. Gardens Ho. 330 (D. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 2900 NW 183RD STREET (Mailing address MAY BE A POST OFFICE BOX) 2900 NW 183RD STREET (Mailing address MAY BE A POST OFFICE BOX) 2900 NW 183RD STREET (Mailing address MAY BE A POST OFFICE BOX) 2900 NW 183RD STREET (Mailing address MAY BE A POST OFFICE BOX) 2900 NW 183RD STREET (MiAMI GARDENS, FLA 33056	name must be distinguishable and contain the word "corport "Company" or "Co." may not be used in the name.	ation" or "incorpo	rated" or the abbreviation "Corp." or "Ing"
(Mailing address MAY BE A POST OFFICE BOX) 2000 (WW 160KD STREET) MIAMI GARDENS, FLA 33056	B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>	<u>2900 N</u> 1) Miami	W 183° Street Cardens Flo 3325
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	2900 NW 183R) STREET
new registered agent and/or the new registered office address; Name of New Registered Agent: (Florida street address) New Registered Office Address; (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:		MIAMI GARDE	NS. FLA 33056
New Registered Office Address:	new registered agent and/or the new registered office		ida, enter the name of the
(City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	New Registered Office Address:		(Florida street address)
(City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:			Florida
		(City)	
	New Registered Agent's Signature, if changing Registered	<u>d Agent:</u>	

Signature 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)

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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>V</u> <u>Mik</u>	n Doe e Jones y Smith	
<u>Type of Action</u> (Check One)	Title	Name	<u>Addres</u> s
l) Change	S	CLINTON BARNES	18030 NW 9TH AVE
Add X Remove			MIAMI, FLA 33169
2) X Change	PLD	Erroll James	19 N. Rain Dow Drive
Remove	VD	Valarie James	819 N. Lainbai Drive
Add Remove			Holiyausid Fla. 33021
4) Change Add			
Remove			
Add			
Remove			
6) Change			
Remove		Page 2 of 4	

utach additional sheets, if necessary).	(Be specific)			
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The date of each amendment(s) addate this document was signed.	option: 6/29/18	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	e date)
<u>Note:</u> If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable statutory filing recoartment of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
There are no members or memb adopted by the board of directo Dated	ers entitled to vote on the amendment(s). The am rs. 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20	endment(s) was/were
have not bee	man or vice chairman of the board, president or ot envice cted, by an incorporator – if in the hands of appointed fiduciary by that fiduciary)	
	Erroll Sand	

(Typed or printed name of person signing)

Presside A. (Title of person signing)