(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Busiless Elitty Name)
(Document Number)
Certified Copies Certificates of Status
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STATE

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 28, 2017

MIQUEL A VIRUET KINGS AVENUE BAPTIST CHURCH 2602 S KINGS AVENUE BRANDON, FL 33511

SUBJECT: KINGS AVENUE BAPTIST CHURCH HOLDING CORPORATION

Ref. Number: 749711

We have received your document for KINGS AVENUE BAPTIST CHURCH / HOLDING CORPORATION and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Liability Company, but your entity is a Florida Non-Profit Corporation. Please complete and return the enclosed blank form(s).

Please be aware that the filing fee is different. We will need an additional \$10.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 017A00017724

Articles of Amendment

to

Articles of Incorporation

Kings avenue Bestist Church A	eldua a.c.C.
(Name of Corporation as currently filed with the Florida Dept. of St.	ate)
7497/1	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statutes, this <i>Florida Not For Profit Corpora</i> amendment(s) to its Articles of Incorporation:	ation adopts the following
A. If amending name, enter the new name of the corporation:	
NIA	The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbrev "Company" or "Co." may not be used in the name.	iation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	5
C. Enter new mailing address, if applicable:	12 25 25 2
(Mailing address MAY BE A POST OFFICE BOX)	
MA	# 200c
41/4	
	<u> </u>
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: P/A	l
N/A	
(Florida street address	;)
<u>New Registered Office Address</u> :	
\mathcal{N}/\mathcal{A}	Florida
(City)	Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations	ļ
Signature of New Registered Agent, if ch	
Signliture of New Registered Agent, if cl	langing

address of each Officer a (Attach additional sheets, Please note the officer/dir P = President; V = Vice P	and/or Director if necessary) rector title by the President; T= Tree = Chief Financial	being added: first letter of the office title: isurer; S= Secretary; D= Director; TR= T Officer. If an officer/director holds more to	er/director being removed and title, name, and frustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office
	ves the corporation	on, Sally Smith is named the V and S. These	e PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	SD	Lisa Tumicki	8602 5-King 5 Are Brandon, FL 3.3511
2) Change Add Remove	<u> 5p</u>	Julie Mathis	3602 5 Kings the Brandon, FL 335/1
3) Change Add Remove		~/~	
4) Change Add Remove		~/~	
5) Change Add		v/k	
Remove Change Add Remove		N/A	

Page 2 of 4

E. If amending or adding additional Articles, enter change(s) here:	1
(attach additional sheets, if necessary). (Be specific)	
N/A	
	
	
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	and/

Page 3 of 4

	date of each amendment(s) adoption: 1-20-1 (this document was signed.	, if other than the
Effe	ctive date if applicable:	
	(no mor <u>e than 90 da</u> ys after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will iment's effective date on the Department of State's records.	not be listed as the
Ado	ption of Amendment(s) (CHECK ONE)	
Ŕ	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.	
	Dated	1
	Signature (By the chairman of 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)	
	Stephen C. Robb (Typed or printed name of person signing)	
	President (Title of person signing)	