

760747

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

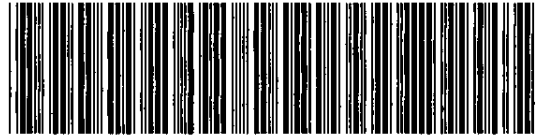
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700139304517

12/30/08--01060--011 **52.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 DEC 30 PM 1:47

Amend/cc
CUB
10 1/8/09

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Alva Community Chapel, Inc.

DOCUMENT NUMBER: 760747

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Norman L. Walker

(Name of Contact Person)

Alva Community Chapel

(Firm/ Company)

P.O. Box 604

(Address)

Alva, FL 33920

(City/ State and Zip Code)

For further information concerning this matter, please call:

Norman Walker

(Name of Contact Person)

at (239) 728-2902

(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 &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☒ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Alva Community Chapel, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

760747

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Norman L. Walker

21061 North River Road

New Registered Office Address:

(Florida street address)

Alva

(City)

Florida 33920

(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 of the position.



Signature of New Registered Agent, if changing

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 DEC 30 PM 1:47

(Attach additional sheets, if necessary)

(attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper appears to be a standard notebook or a sheet of stationery designed for writing. The edges of the paper are slightly irregular, suggesting it might be a scan of a physical document. There is no handwriting or other markings on the page.

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>Director</u>	<u>Ernest Ferrell</u>	<u>2880 Packinghouse Rd</u> <u>Alva, FL 33920</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>Director</u>	<u>Vernon Allen</u>	<u>18660 Persimmon Ridge Rd</u> <u>Alva, FL 33920</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Director</u>	<u>Paul Jarrett</u>	<u>6025 West State Road 80</u> <u>LaBelle, FL 33935</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(Attach additional sheets, if necessary)

(attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

The date of each amendment(s) adoption: 12/23/08


Effective date if applicable: 12/23/08
(no more than 90 days after amendment file date)

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.

Dated 12/24/08

Signature


(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)

Norman L. Walker

(Typed or printed name of person signing)

President

(Title of person signing)