771312

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ONCHAIR

COVER LETTER

TQ: Amendment Section Division of Corporations

NAME OF CORPORATION: OUR LADY OF FATIMA OF SPRING HILL,	luc.
DOCUMENT NUMBER: 771312	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	2817 DEC 29
MARY FOELLER (Name of Contact Person)	<u></u>
(Name of Contact Person)	9
OUR LADY OF FATIMA OF SPRING HILL, INC. (Firm/ Company)	
10401 SPRING HILL DR (Address)	6 3'
SPRING HILL, FL 34608 (City/ State and Zip Code)	
N/A E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
MARY FOELLER at (352) 293-3912	
(Name of Contact Person) (Area Code) (Daytime Telephone Num	ber)
Enclosed is a check for the following amount made payable to the Florida Department of State:	
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) □ \$643.75 Filing Fee & □ \$64	
Mailing Address Street Address	
Amendment Section Amendment Section	

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

Articles of Amendment

to

Articles of Incorporation of

of

OUR LADY OF FATIME	OF SPRING HILL, INC 2017 DEC
(Name of Corporation as cur	rently filed with the Florida Dept. of State)
77 <i>131</i> 2	
(Document No	umber of Corporation (if known)
Duranta de accidir de Carlo Ca	and Block National Control
amendment(s) to its Articles of Incorporation:	ttutes, this Florida Not For Profit Corporation adopts the follow
A. If amending name, enter the new name of the corpo	ration:
N/a	The
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	The poration" or "incorporated" or the abbreviation "Corp." or "In
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>ss</u>) .
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered office	ce address:
Name of New Registered Agent: \(\sum_{\ell} \)	A
	(Florida street address)
New Registered Office Address:	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:
I hereby accept the appointment as registered agent. I an	
	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)

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 D V Mike Jo SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove	0_	THOMAS SEBASTIAN	16826 SATICOYST. VAN Nuys, CA 91406
2) Change Add Remove		TAMMY MERCER	2175 New Azora Rd Spring Hill, FL 34408
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

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

	e date of each amendment(s) adoption: \(\frac{\frac{1}{A}}{A} \) this document was signed.	, if other than the
Effe	ective date if applicable: DECEMBER 22, 2017	
	(no more than 90 days after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be urnent's effective date on the Department of State's records.	e listed as the
Ado	option 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.	
Ä	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 DECEMBER 22,2017	
	Signature Mary L. Foeller	
	(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)	
	MARYI. FOELLER	
	(Typed or printed name of person signing) PRESIDENT	
	(Title of person signing)	