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L15000139358

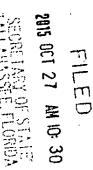
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COVER LETTER

TO: R	egistration Se ivision of Cor	ction porations	•					
011D 111 011		RISTIAN LEADERSHIP LLC						
SUBJECT: Name of Limited Liability Company								
The enclos	ed Articles of	Amendment and fee(s) are sub-	mitted for filing.	٤				
Please retu	rn all correspo	ndence concerning this matter	to the following:					
		LYNN B. AUST						
		***	Name of Person	· · · · · · · · · · · · · · · · · · ·				
		LYNN B. AUST, PL						
			Firm/Company					
		1220 B. LIVINGSTON ST	REET					
			Address	10.000-10.000				
		ORLANDO, FL 32803						
			City/State and Zip Code	, 				
		doveattorney@austlaw.biz						
		E-mail address: (to be used for future annual report notifi	cation)				
For further	r information c	oncerning this matter, please ca	all:					
Lynn B. A	ust		407 447-5399 at ()					
	Name o	f Person	Area Code Daylime	Telephone Number				
Enclosed i	s a check for t	he following amount:						
\$25.00) Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				

MAILING ADDRESS: Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2015 OCT 27 AM 10: 30

SECRETARY OF STATE! TALLAHASSEE, FLORIDA

ABEL CHRISTIAN LEADERSHIP LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company vi Florida document number L15000139358	vere filed on <u>08/14/2015</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	ity company here:	·
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:	·	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office address here: Name of New Registered Agent:	ce address on our records, <u>enter th</u>	e name of the new
New Registered Office Address:	Enter Florida street address	
	Florido	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	erformance of my duties, and I am fan ovided for in Chapter 605, F.S. Or, if	niliar with and this document is
If Channi	ng Registered Agent Signature of New Degle	Jared Agant

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Rian Seipler	13413 Madison Dock Road	Add
		Orlando, FL 32828	☐ Remove
			☐ Change
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