

L17000250882

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

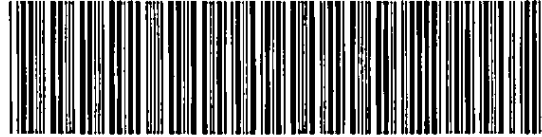
(Business Entity Name)

(Document Number)

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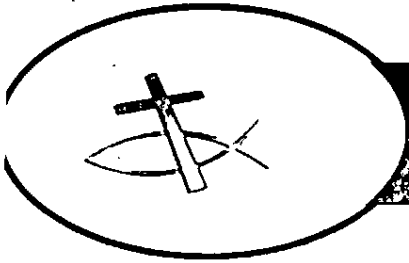
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FILED  
17 DEC 22 AM 10:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DEC 26 2017



THE PCC COMMUNITY DEVELOPMENT, LLC.  
2300 NW 6TH STREET | POMPANO BEACH, FL 33069  
OFFICE: 954-968-6777 - FAX: 954-968-6633

REV. DR. WYLIE L.  
HOWARD, SR.,  
CHAIRMAN OF  
THE BOARD,  
PCCC, INC.

Rev. Gary  
McLamore,  
Vice-President of  
PCCC, Inc. &  
Chairman of  
Concerned  
Clergy (Affiliate  
of PCCC, Inc.)

Rev. Dr. Gary  
McCleod, PCCC,  
Inc. Chairman of  
Community  
Relations

Rev. Joseph  
Harley,  
Secretary

Rev. Evander  
Derico, Finance  
Chairman

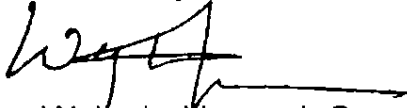
Rev. Aaron  
Wiggins,  
Chaplain

December 19, 2017

Please see the attached amended information for The PCC  
Community Development, LLC.

Please contact us at 754-245-0068 and return the Letter of  
Acknowledgement to 2300 NW 6<sup>th</sup> Street, Pompano Beach, Florida  
33069.

Sincerely,



Wylie L. Howard, Sr.

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

The PCC Community Development, 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 were filed on 12/7/2017 and assigned  
Florida document number L17000250882.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "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 on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

*Enter Florida street address*

Florida

*City*

*Zip*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

If Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	The Pompano Christian Clergy Cot	2300 NW 6th Street	<input checked="" type="checkbox"/> Add
		Pompano Beach, Fl 33069	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Wylie L. Howard, Sr.	2300 NW 6th Street	<input type="checkbox"/> Add
		Pompano Beach, Fl 33069	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Wylie L. Howard, Sr.	2300 NW 6th Street	<input checked="" type="checkbox"/> Add
		Pompano Beach, Fl 33069	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee

FILED  
17 DEC 22 AM 10 54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA