N 000 000 0 2951

Office Use Only



900349508749

08/10/20--01019--026 **35.00

(1) KI 7:

Amend

SEP 2:5 2020 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

	fellowship of Ocala. Inc
N00000002951	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	submitted for tiling.
Please return all correspondence concerning this i	matter to the following:
Lisa Sabatella	
-	(Name of Contact Person)
Abundant Life Fellowship of Ocala, Inc.	
	(Firm/ Company)
PO Box 4498	
	(Address)
Ocala, FL 34478	
	(City/ State and Zip Code)
Langiro157@gmail.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	lease call:
Lisa Sabatella	352 299-5730 at
(Name of Contact Pe	
Enclosed is a check for the following amount made	de payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Star	
Mailing Address	Street Address

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

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ABUNDANT LIFE FELLOWSHIP OF OCALA, INC.

(Name of Corporation as currently filed with the Flo N00000002951	lorida Dept. of State)	
	t Number of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not For Profit Corporation adopts the	following
A. If amending name, enter the new name of the co-	orporation:	
N/A		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	corporation" or "incorporated" or the abbreviation "Corp." (
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADD		
		, <u></u>
		. 5
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	N/A N/A	
		<u>;</u> ⊃
D. If amending the registered agent and/or register		ŗ
new registered agent and/or the new registered of		
Name of New Registered Agent:	·//A	
	(Florida street address)	
New Registered Office Address:		
<u> </u>	Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Regil learnest accept the appointment as registered agent.	<u>ristered Agent:</u> I am familiar with and accept the obligations of the position.	
	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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change Add	TR	Dr Ed Gabler	10620 SW 27th Ave #A14 Ocala, FL 34476
X Remove			
2) Change Add	TR	Jacqueline Jan Juhl	1777 SW 155th Place Rd Ocala, FL 34473
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		onal Articles, enter change(s) here: ssary). (Be specific)	·
		·	
	_		

		
<u> </u>		
	· · · · · · · · · · · · · · · · · · ·	
		
		
		
	August 10, 2020	
The date of each amendment(s) adoption: date this document was signed.	August 10, 2020	, if other than the
Effective date if applicable:	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, the of State's records.	is date will not be listed as the
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.

Dated	August 10, 2020
Signatu	L'use Schotille
	(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Lisa Sabatella
	(Typed or printed name of person signing)

(Title of person signing)