NO100000 6003

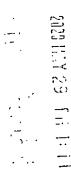
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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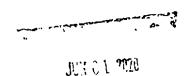
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ORD CHURCH
N01000006003 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	tter to the following:
CHARLES AARON DERKSEN	
	(Name of Contact Person)
WEST COAST WORD CHURCH	
	(Firm/ Company)
431 EAST SPRUCE STREET	
	(Address)
TARPON SPRINGS, FLORIDA 34689	
	(City/ State and Zip Code)
INFO@WESTCOASTWORD.COM	
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, pleas	se call:
PATRICIA NELSON/ OFFICE MANAGER	727-942-4073 at
(Name of Contact Perso	
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	
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

WEST COAST WORD CHURCH INC.

(Name of Corporation as currently filed with the Florida I	Dept. of State)		
N01000006003			
(Document Number	er of Corporation (if knows	1)	
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Pr	ofit Corporation adopts the	following
A. If amending name, enter the new name of the corporat	ion:		
name must be distinguishable and contain the word "cornoral	(Document Number of Corporation (if known) tion 617,1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following neorporation: The new name of the corporation: The new add contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." or "Inc." e used in the name address, if applicable: BE A STREET ADDRESS) is, if applicable: A POST OFFICE BOX) agent and/or registered office address in Florida, enter the name of the release of the registered Agent: (Florida street address) (Florida street address) Florida (City) (City) (Zip Code)		
"Company" or "Co," may not be used in the name.	ion of messparate		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
		· .	27.2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		٠.,	The new p. " or "Inc. "
(Stating datiess SEAT BE AT LOST OF FICE BOX)		-	
			:
		er the name of the	
new registered agent and/or the new registered office a	ddress:		
Name of New Registered Agent:			
New Registered Office Address:	(Florida	street address)	
		Florida	
	(City)		
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am factorise the appointment as registered agent.	Agent: miliar with and accept the o	obligations of the position.	
SS	gnature 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 = Trustec; 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

wirke Jones, v as Kem	ove, and sally sm	im, 5) us un rad.	•
Example: X_Change X_Remove X_Add	<u>V</u> <u>Mik</u>	<u>ı Doe</u> e Jones v Smith	128 P. T.
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>S</u>	ANGELA DERKSEN	1484 RIDGETOP LANE TARPON SPRINGS ,FL 34689
Remove 2) Change Add	T	JEFFREY KINGSFORD	609 SALT LAKE DRIVE TARPON SPRINGS, FL 34689
Remove 3) Remove X Add Remove	<u>D</u>	KURT OWEN	10380 SW VILLAGE CENTER DI #185 PORT SAINT LUCIE, FL 34987
4) Change Add			
Remove 5) Change Add			
Remove 6)ChangeAdd			
E. If amending or ac (attach additional)		Articles, enter change(s) here: v). (Be specific)	
			

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	FEBRUARY 6, 2020			
The date of each amendment(s) adoption date this document was signed.	· <u></u>			_, if other than the
Effective date if applicable:				
	no more than 90 days after amena	dment file date)		
Note: If the date inserted in this block does document's effective date on the Departme	s not meet the applicable statutory nt of State's records.	filing requirements, this da	te will not b	oe listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
☐ The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of	of votes cast for the amendm	ent(s)	

uuoj	oted by the board of directors.
	Signature Coult Court ons en
	(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)
	CHARLES AARON DERKSEN
-	(Typed or printed name of person signing)
	-
	PRESIDENT

(Title of person signing)