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3 *1	COVER LETTER		
TO: Amendment Division of	Section Corporations		
NAME OF COI	PORATION: Hope Unites Chi	urch of Lake Mary, two	
DOCUMENT N	UMBER: NO3000004589		1 P.
The enclosed Arr	icles of Amendment and fee are submitted for	or filing.	
Please return all	correspondence concerning this matter to the	following:	
	Tammy Mackey (Name of Contact Person)		
	Hupe Unites (Firm/Company)		
MARET TT 31.00	0, Box 608634 (Address)		ć.,
DG MAR 21	Mando, FL 32861 (City/State and Zip Code)	<u>D</u>	

For further information concerning this matter, please call:

ickey (Area Code & Daytime Telephone Number) _at (_ ammi (Name of Contact Person)

Enclosed is a check for the following amount:

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S35 Filing Fee \$43.75 Filing Fee & □\$43.75 Filing Fee & S52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

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Hope (must contai language; "(M.e.+ AMENDN	RPORATE N 2. Unite S n the word "corp Company" or "C TOPOU MENIS ADO and/or Articl	<u>5 Unit</u> poration," "incor o." may not be u itan C	<u>ed_Chu</u> porated," or the used in the name LDMM HER THAN	of a not for pro unity NAME CHA	nit corporation Chui NGE) Inc	icate Art	T	inport ir هو ر
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date of adoption of the amendment(s) was: $5 3 2005$	
ctive date if <u>applicable</u> :	
(no more than 90 days after amendment file date)	
ntion of Amendment(s) (CHECK ONE)	
The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.	
There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.	
Signature	
Tammy Mackey	
	_ r 107 krms .
FILING FEE: \$35	
	etive date if <u>applicable</u> :