# NO4 000004396

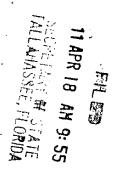
(Requestor's Name)		
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Harbor Light	Christian Academy Priv	ate School Inc.	
DOCUMENT NUM	IBER: N0400004396			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	atter to the following:		
		llis Sanzone		
	(Name o	f Contact Person)		
	Harbor Light Christian	n Academy Private School Ir	nc.	
	(Fire	m/ Company)		
	705 Delespine Ave.			
	(	(Address)		
	St. Augu	ıstine, Fl. 32084		
	(City/ St	ate and Zip Code)		
-		zone@yahoo.com ed for future annual report notific	ation)	
For further information	on concerning this matter, pleas	se call:		
Phyllis Sanzone		at (904)_819-598		
(Name	of Contact Person)	(Area Code & Dayti	me Telephone Number)	
Enclosed is a check f	or the following amount made	payable to the Florida Departmer	at of State:	
□\$35 Filing Fee	☑ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ng Address	Street Address	10 411410004)	
Amendment Section Division of Corporations		Amendment Section Division of Corporation	one	
P.O. Box 6327		Clifton Building	VIIO	
Tallahassee, FL 32314			2661 Executive Center Circle	

Tallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 11, 2011

PHYLLIS SANZONE 705 DELESPINE AVE. ST. AUGUSTINE, FL 32084

SUBJECT: HARBOR LIGHT CHRISTIAN ACADEMY, INC.

Ref. Number: N0400004396

We have received your document for HARBOR LIGHT CHRISTIAN ACADEMY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Your document is missing the last page with this information. Please find last page of the articles of amendment enclosed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 911A00008647

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www.sunbiz.org

### Articles of Amendment to Articles of Incorporation of

Harbor Light Christian Ac	<del> </del>
(Name of Corporation as currently filed wit	h the Florida Dept. of State)
(Document Number of Corpor	ration (if known)
Pursuant to the provisions of section 617.1006, Florida Statut the following amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts
A. If amending name, enter the new name of the corporat	ion:
Lighthouse Christian Academy F	Private School Inc.
The new name must be distinguishable and contain the wor abbreviation "Corp." or "Inc." "Company" or "Co." may n	rd "corporation" or "incorporated" or the notes to the set of the name.
B. Enter new principal office address, if applicable:	110 Circle Dr. E
(Principal office address <u>MUST BE A STREET ADDRESS</u>	St. Augustine, Fl. 32084
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 4258
	St. Augustine, Fl. 32085
	<u> </u>
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
Name of New Registered Agent:	
New Registered Office Address: (Flo	orida street address)
	, Florida
	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I an position.	
Signature of Ne	w 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)

<u>Title</u>	Name	Address	Type of Action
Secart	Eileen Betke	110 Circle Dr. E.	🗹 Add
<del></del>		St. Augustine, Fl. 32084	Remove
		· · · · · · · · · · · · · · · · · · ·	
	*		
<del></del>		•	□ Add □ Remove
		······································	L Remove
E. If amendia	ng or adding additional Articles, enter	r change(s) here:	
(arrach ada	itional sheets, if necessary). (Be spec	ific)	
	<del>77.00</del> •		
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The date of each amendment(s) adoption:	April 5, 2011
Effective date if applicable: April 5, 201	(date of adoption is required)
(no m	ore than 90 days after amendment file date)
Adoption of Amendment(s)	CHECK ONE)
The amendment(s) was/were adopted by the was/were sufficient for approval.	he members and the number of votes cast for the amendment(s)
There are no members or members entitle adopted by the board of directors.	ed to vote on the amendment(s). The amendment(s) was/were
Dated_April 5, 2011	
Signature Q Quy Se	i Samue
have not been sele	or vice chairman of the board, president or other officer-if directors cted, by an incorporator – if in the hands of a receiver, trustee, or the fiduciary by that fiduciary)
	Phyllis Sanzone
T)	yped or printed name of person signing)
Reg.	Agent/School Alministrator (Title of person signing)

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