N0400005762

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COVER LETTER

TO: Amendment Section Division of Corporations

Point Washington UNAME OF CORPORATION:	United Methodist Churc	h, Inc. 	
N04000005762 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this ma			
Business Manager, Amy Shell	(Name of Contact Pe	rson)	
	(Name of Condition 10	,	
Point Washington United Methodist Church, Inc.			
	(Firm/ Company)	
290 North County Highway 395			
	(Address)		
Santa Rosa Beach / Florida 32459			
	(City/ State and Zip	Code)	
amyshell@pwumc.org			_
E-mail address: (to be u	sed for future annual rep	ort notification)
For further information concerning this matter, plea	ase call:		
Theodore C. Cox, Jr		850	258-4794
(Name of Contact Per		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made		Department of	State:
_	& □\$43.75 Filing Fee		0 Filing Fee
\$35 Filing Fee	us Certified Copy	Certif	icate of Status
31	(Additional copy		ied Copy
	enclosed)	•	tional Copy is osed)
Mailing Address		reet Address	
Amendment Section	Α	mendment Sect	

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

POINT WASHINGTON UNITED METHODIST CHURCH, IN	IC.
--	-----

	1 Think of Chatal
ently filed with the Flori	da Dept. of State)
nber of Corporation (if kn	own)
utes, this <i>Florida Not Fo</i> r	Profit Corporation adopts the following
<u>ation:</u>	
	The new
ration" or "incorporated	l" or the abbreviation "Corp." or "Inc."
N/A	
<u>S</u>) _{N/A}	
N/A	三
[477]	18
N/A	· · · · · · · · · · · · · · · · · · ·
N/A	<u></u>
N/A	
office address in Florida	, enter the name of the
ce address:	
(I	Florida street address)
	X1/A
	, Florida
(City)	(Zip Code)
red Agent: m familiar with and accep	ot the obligations of the position.
Signature of New Regi	istered Agent, if changing
	nber of Corporation (if knutes, this Florida Not Formation: ration: ration: N/A N/A N/A N/A N/A N/A N/A Office address in Florida ce address: (City) red Agent: m familiar with and acceptions.

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	PT John Do V Mike Jo SV Sally S	ones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
X Change	TR - C	Theodore C. Cox, Jr.	480 Amelia Lane
· 			Santa Rosa Beach, Florida
Add			32459
Remove	,	i i i i a a la	
2) Change	TR-Vice C	Judith B. Brock	9961 Highway 30H
Add			Seacrost Beach, FC 32413
Remove			Selling Bederift JE 110
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		Page 7 of 4	

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)		
A	_	 	
		 	
		 <u></u>	

	N/A	, if other than the
The date of each amendme	nt(s) adoption:	
date this document was signe		
wer at a date if annihooble	N/A	
Effective date if applicable	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date or	this block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was was/were sufficient for	/were adopted by the members and the number of votes cast for the amendment(s) approval.	
There are no members adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.	
8 N	MARCH 2019	
Dated		
Ç	The De last	
Signature	the chairman or vice chairman of the board, president or other officer-if directors	
/ (By	re not been selected, by an incorporator - if in the hands of a receiver, trustee, or	
oth	er court appointed fiduciary by that fiduciary)	
04.	······································	
,	Theodore C. Cox, Jr	
	(Typed or printed name of person signing)	
	Trustee Chair	
	(Title of person signing)	