N0400006321

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(Ad	ldress)			
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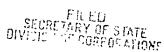
TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION	FREEDOM SEMINA	RY OF THE TREA	SURE COAS	Γ, INC.	
DOCUMENT NUMBER:	N04000006321				
The enclosed Articles of Amer	adment and fee are subm	itted for filing.	1 = 2 : 13		
Please return all corresponden	ce concerning this matter	to the following:			
JEFFERY BURNSED					
	(Name of Contact Pe	rson)		_
FREEDOM SEMINARY OF	THE TREASURE COA	ST, INC.			
	,	(Firm/ Company) ,		_
P.O. BOX 16505					
		(Address)			_
JACKSONVILLE, FLORIDA	32245				
	(City/ State and Zip (Code)		
JEFFBURNSED@JUNO.CO	М				
E-n	nail address: (to be used	for future annual rep	ort notification)	
For further information concer	ning this matter, please c	all:			
JEFFERY BURNSED		at	904	485-7189	
(1)	lame of Contact Person)		(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the fol	lowing amount made pay	able to the Florida D	Department of S	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & □ Certificate of Status	\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certifi Certifi	D Filing Fee icate of Status led Copy tional Copy is sed)	
Mailing Ad	dress	Str	eet Address		

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



FREEDOM SEMINARY OF THE TREASURE COAST, INC. 16 FEB 26 AM 10: 27 (Name of Corporation as currently filed with the Florida Dept. of State) N04000006321 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: FREEDOM SEMINARY OF THE FIRST COAST, INC. name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. 2967 HUFFMAN BLVD. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) JACKSONVILLE, FL 32246 C. Enter new mailing address, if applicable: P.O. BOX 16505 (Mailing address MAY BE A POST OFFICE BOX) JACKSONVILLE, FL 32245 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: JEFFERY BURNSED Name of New Registered Agent: 2967 HUFFMAN BLVD. (Florida street address) New Registered Office Address: **JACKSONVILLE** Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Page 1 of 4

New Register

ed 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	PT John Doe V Mike Jones SV Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) X Change	PRES	JEFFERY BURNSED	9719 NIMITZ CT. N.	
Add			JACKSONVILLE, FL	
Remove			32246	
2) X Change	VP	TIFFANY PAROCHA	11927 CORNELIUS ST	
Add			JACKSONVILLE, FL	
Remove			32246	
X Change	TREAS	JOSEPHINE BURNSED	9719 NIMITZ CT. N	
Add			JACKSONVILLE, FL	
Remove			32246	
4) X Change	SEC	TIFFANY BURNSED	9719 NIMITZ CT. N.	
Add			JACKSONVILLE, FL	
Remove			32246	
5) X Change	REP	ROBERT ROACH	2225 SW IMPORT DRIVE	
Add			PORT ST. LUCIE, FL	
Remove			34953	
6) Change				
Add				
Remove				

•		s, enter change(s Se specific)				
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The	date of each amendmen	t(s) adoption:	, if other than the
date	this document was signed	1.	SECRETERY
5.66	,		DIVINE" FROM STATE
Ette	ective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	10 550
		(No more than ye day) agen amenang sayer ame	16 FEB 26 AM 10: 27
_		his block does not meet the applicable statutory filing requirements, the Department of State's records.	his date will not be listed as the
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/w was/were sufficient for a	were adopted by the members and the number of votes cast for the ampproval.	endment(s)
	There are no members or adopted by the board of	members entitled to vote on the amendment(s). The amendment(s) directors.	was/were
	Dated 02/22 Signature	Hunde C	1
	(By the	chairman of vice chairman of the board, president or other officer-inot been selected, by an incorporator — if in the hands of a receiver, to court appointed fiduciary by that fiduciary)	
	Ti	FFANY PAROCHA	
	_	(Typed or printed name of person signing)	
	VI	ICE PRESIDENT	
		(Title of person signing)	