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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : MORAN KIDO LYONS JOHNSON, P.A.

Account Number : 120000000003 Phone : (407)841-4141 Fax Number : (407)841-4148

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Enail Address: bmoran@morankidd.com

## COR AMND/RESTATE/CORRECT OR O/D RESIGN GRACE CHURCH OF GREATER ORLANDO, INC.

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AUG 1 4 2020

Tallahassee, FL 32314

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: GRACE CH	URCH OF GREATER ORL	ANDO, INC.	
DOCUMENT NUMBER: N05000009432		<u> </u>	
The enclosed Articles of Amendment and fee	are submitted for filing.		
Please return all correspondence concerning the	nis matter to the following:		
Brian J. Moran, Esq.			
	(Name of Contact P	erson)	
Moran Kidd Lyons Johnson Garcia, PA			
<u> </u>	(Firm/ Compan	y)	
111 N. Orange Avenue, Suite 900			
	(Address)		
Orlando, Florida 32801			
	(City/ State and Zip	Code)	
bmomn@morankidd.com			
E-mail address: (to	be used for future annual re	port notificatio	n)
For further information concerning this matter	, please call:		
Brian J. Moran	at	407	841-4141
(Name of Contact		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount a	nade payable to the Florida	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing F Certificate of \$		Certif is Certif	D Filing Fee icate of Status ied Copy tional Copy is used)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	An Di	reet Address nendment Sectivision of Corpo ne Centre of T	prations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

GRACE CHURCH OF GREATER ORLANDO, INC.  (Name of Corporation as currently filed with the Florida	Dept. of State)	
N05000009432		
(Document Num	ber of Corporation (if k	(nawn)
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	tion:	
Manna must be distinguishable and contain the and "		The new
nams must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	alion or incorporale	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	(i)	
		700
		<u></u>
Enter new mailing address, if applicable:		9.
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	<del></del>	
		<del></del>
). If amending the registered agent and/or registered off	ice address in Florida.	conter the name of the
new registered agent and/or the new registered office	address:	OHIOT SHY WANTE OF THE
Name of New Registered Agent:	<del></del>	
<del></del>		orida sireet address)
New Registered Office Address:		
<del></del>		, Florida
	(City)	(Zip Code)
iew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	Agent: miliar with and accept	the obligations of the position.
<del></del>		

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 = Chaliman 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 I           V         Mike           SV         Sally		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) × Change Add	<u>D</u>	Ritenour, Heath	2165 Alaqua Drive Longwood, FL 32779
Remove			
2) Change Add			
Remove Change Add Remove			
4) Change Add			
Remove  5) Change Add  Remove			
6) Change Add			
E. If amending or addin (autach addinonal shee		rticles, enter change(s) here: (Ba specific)	
		<del>-</del>	

		<del></del>
		<del></del>
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<u> </u>		<u> </u>
		<del>,</del> _
· · · · · · · · · · · · · · · · · · ·		
The date of each amendment(s) ad late this document was signed.	option:	, if other than t
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blod document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, to	his date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	

There are no members or members untitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 35/4/20
Signature  (By the chairman of vice chairman of the board, president or other officer-if directors  Charte not been selected, by an incorporator—if in the hands of a receiver, trustee, or
other court appointed fiduciary by that fiduciary)
(Typed or primed name of person signing)
Director

(Title of person signing)