

NOV 28 2017

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

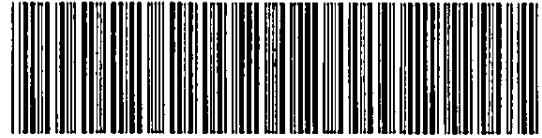
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/03/17--01018--013 **35.00

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

17 NOV 28 AM 8:12

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NOV 28 2017
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 6, 2017

PAO MOUA
CENTRAL FL ALLIANCE CHURCH, INC
PO BOX 1353
MINNEOLA, FL 34755

SUBJECT: CENTRAL FLORIDA ALLIANCE CHURCH, INC.
Ref. Number: N06000001299

We have received your document for CENTRAL FLORIDA ALLIANCE CHURCH, 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):

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 217A00022428

Articles of Amendment
to
Articles of Incorporation
of

Central Florida Alliance Church, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

ND600000699

(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:

The new 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.

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

405 MAIN AVE
MINNEOLA, FL 34715

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

11249 LAKE MONTGOMERY BLVD
CLERMONT, FL 34715

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NOV 28 AM 8:14
STATE OF FLORIDA

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:

Name of New Registered Agent: _____

(Florida street address)

New Registered Office Address: _____

(City)

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.

Signature of New 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)

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>VP</u>	<u>VUE LOR</u>	<u>1638 RIDGEMOOR DRIVE</u> <u>MASCOTTE, FL 34753</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>SEC</u>	<u>THONG MOUA</u>	<u>4753 WHITE BAY CIRCLE</u> <u>WESLEY CHAPEL, FL 33545</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>TR</u>	<u>MAI KIAB</u>	<u>10324 CAYO COSTA CT</u> <u>CLERMONT, FL 34711</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>MAI YANG</u>	<u>10324 CAYO COSTA CT</u> <u>CLERMONT, FL 34711</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>C</u>	<u>JOHN YANG</u>	<u>10324 CAYO COSTA CT</u> <u>CLERMONT, FL 34711</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>TIP MOUA</u>	<u>1011 BLUEGRASS DRIVE</u> <u>GROVELAND, FL 34736</u>

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.

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<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
7) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>SEC</u>	<u>PAO MOUA</u>	<u>7128 ALLOY STREET</u> <u>WEBSTER, FL 33597</u>
8) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>JOHN MOUA</u>	<u>928 CORNELL AVENUE</u> <u>CLERMONT, FL 34711</u>
9) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>_____</u>	<u>_____</u>	<u>_____</u> <u>_____</u>
10) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>_____</u>	<u>_____</u>	<u>_____</u> <u>_____</u>
11) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>_____</u>	<u>_____</u>	<u>_____</u> <u>_____</u>
12) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>_____</u>	<u>_____</u>	<u>_____</u> <u>_____</u>

10/31/17

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

10/31/17

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

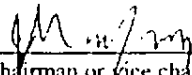
Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

10/29/17

Dated _____

Signature _____



(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

JOHN YANG

(Typed or printed name of person signing)

CHAIRMAN

(Title of person signing)