NO600000YW3

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
,	,	
(City/s	State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Busi	ness Entity Nan	ne)
(Docu	ıment Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



800239084708

08/31/12--01003--022 **43.75





SEP 17 2012 T. ROBERTS



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 31, 2012

RAYMOND FAVICHIA 8149 MACKINAW RD BROOKSVILLE, FL 34613

SUBJECT: AMAZING GRACE TO THE NATION'S CHURCH, INC.

Ref. Number: N06000004083

We have received your document for AMAZING GRACE TO THE NATION'S CHURCH, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Rev. Raymond Favichia must sign document on page 4 in the space for signature.

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.

Tina Roberts Regulatory Specialist II

Letter Number: 712A00022298

RECEIVED

12 SEP 17 AM H: 47

PER 17 AM H: 47

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:AMAZING G	GRACE TO THE	NATION'S CHURCH, INC.
DOCUMENT NUMBER: N0600000	4083	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Raymond Favichia		
	(Name of Contact Per	son)
	(Firm/ Company)	
8149 Mackinaw rd		
	(Address)	
Brooksville fl. 34613		
	(City/ State and Zip C	ode)
hgpastor@tampa	abay.rr.com)
E-mail address: (to be us	ed for future annual repo	ort notification)
For further information concerning this matter, please	se call:	
Raymond Favichia	_{at} 352	4281526
(Name of Contact Person)	(Area	Code & Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida D	epartment of State:
S35 Filing Fee S43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Am Div Clif	et Address endment Section ision of Corporations ion Building 1 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to ' **Articles of Incorporation**

AMAZING GRACE TO THE NATION'S CHURCH, INC.

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

N06000004083

(Document Number of Corporation (if known)

2012 SEP 1 4:09

resuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the followed the following t	łówii
If amending name, enter the new name of the corporation:	
	he ne
me must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or ' Company <mark>" or "Co." may not be used in the name</mark> .	"Inc.
Enter new principal office address, if applicable: rincipal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Mulling duaress MAT BE A POST OFFICE BOX)	
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:	
ew Registered Office Address: (Florida street address)	
, Florida	
(City) (Zip Code)	
ew Registered Agent's Signature, if changing Registered Agent: 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	

Page 1 of 4

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 <math>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	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	ds	Margaret Favichia	8149 Mackinaw rd
Add			brooksville fl34613
X Remove			
2) Change	<u>t</u>	Anthony Stramiello	16416 Drysdale
X Add			spring hill fl 34609
Remove			
3) Change			*************************************
Add			
Remove			
4) Change	-		
Add			
Remove			
5) Change			
Add	 		
Remove			
			
6) Change			
Add			
Remove			···

L. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
	•
<u>-</u>	*
•	

The date of each amendment(s) adoption: July 01 2012					
	Effective date <u>if applicable</u> :				
	(no more than 90 days after amendment file date)				
4do j	ption 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.				
	Dated Aug 27 2012				
	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)				
	Rev.Raymond Favichia				
	(Typed or printed name of personsigning)				
	President				
	(Title of person signing)				