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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: City of Re	fuge Melbo	urne
DOCUMENT NUMBER: NO6000075	508	,
The enclosed Articles of Amendment and fee are submi	ined for filing.	O
Please return all correspondence concerning this matter	to the following:	
Alberto Suriel		
(	Name of Contact Person	)
City of Refuge Melbourne	9	
	(Firm/ Company)	
1991 Port Malabar Blvd N	ΝE	
	(Address)	
Palm Bay, Florida 32905		
(0	City/ State and Zip Code	e)
E-mail address: (to be used f	or future annual report r	notification)
For further information concerning this matter, please ca	all:	
Alberto Suriel	<sub>at (</sub> 321	<sub></sub> 795-6661
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pay-	able to the Florida Depa	rtment 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	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

FILED

City of Refuge Melbourne, Inc.

2015 FEB 17 PM 4: 34

SECRETARY OF STATE TALLAHASSEE, FLORIDA (Name of Corporation as currently filed with the Florida Dept. of State) N06000007508 (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: 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: , Florida 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

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 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 Y Mike Jo SV Sally S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	T	Ashley Englert	699 Tejon Ave SW
Add			Palm Bay, FL
X Remove			32908
2) Change	<b>T</b>	Nancy Cox	983 Walden Blvd SE
X			Palm Bay, FL
Remove			32909
3) Change			
Add			
Remove			
4) Change			
Add	<del>- 15</del>		
Remove			
5) Change	<del></del>		
Add			
Remove			
6) Change			
	<del></del>		
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)	
• •		
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		· -

The date of each amendment(s) adoption: 2/1/2013		, if other than the
ate this document was signed.  ffective date if applicable: 2/1/2015		
-	(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s	s) ( <u>CHECK ONE</u> )	
☐ 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.	
Dated 2/	10/2015	
Signature		
hav	the thairman or vice chairman of the board, president or other officer-if directors e not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)	<del></del>
Albei	rto Suriel	
<del></del>	(Typed or printed name of person signing)	
Direc	ctor/Pastor	
-	(Title of person signing)	