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## **COVER LETTER**

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**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI	SVEA ASSEMBLY	OF GOD INC			
	N06000009258				
DOCUMENT NUMBER:	<del></del>		<del></del>		
The enclosed Articles of Ar	mendment and fee are sub	mitted for filing.			
Please return all correspond	lence concerning this matt	er to the following:			
Thomas Moore					
		(Name of Contact	Persor	1)	
West Florida District Coun	cil Assemblies of God				
		(Firm/ Compa	ny)		
4792 US 90					
	·	(Address)			
Marianna, FL 32446					
<u> </u>		(City/ State and Zi	p Code	e)	
	Contacta WF L E-mail address: (to be used	DAG. ORG			
	-mail address: (to be use	for future annual	report i	notification	1)
For further information con	cerning this matter, please	e call:			
Thomas Moore			850 at	)	4822986
	(Name of Contact Person			ea Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made p	ayable to the Florid	a Depa	irtment of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing A	Address	<u>\$</u>	treet .	Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

SVEA ASSEMBLY OF GOD INC

2020 Jr. 13 Fil 1: 05

(Name of Corporation as currently filed with the Florida I	Dept. of State)	
N06000009258		
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit Cor</i>	poration adopts the following
A. If amending name, enter the new name of the corporat	ion:	
New Life Assembly of God Church, Inc.		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abb	
B. Enter new principal office address, if applicable:	2678 Highway 147 West	
(Principal office address MUST BE A STREET ADDRESS	Laurel Hill, FL 32567	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Po Box 1336	
	Paxton, FL 32538	
P. Maria all add a land		
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		ame of the
Name of New Registered Agent:	M/A	
New Registered Office Address:	(Florida street add	iress)
New Negistereu Office Audress.		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai		ons of the position.
		y <b>.</b>
Si	gnature of New Registered Agent, i	f 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 Do V Mike Jo SV Sally St	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
Change Add	<u>C</u>	Thomas Moore	4792 US 90 Marianna, FL 32446
Remove			
2) Change Add	VP	Mark Jakelsky	4792 US 90 Marianna, FL 32446
Remove 3) Remove			
4) Change Add			
Remove  5) Change Add Remove			
6) Change Add			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

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The date of each amendment(s) as	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
Effective date if applicable.	(no more than 90 days after amendment file date)	<del></del>
	(12 1121 a trian to ways agree amonament fit wine)	
<u>Note:</u> If the date inserted in this blo document's effective date on the De	bek does not meet the applicable statutory filing requirements, this date will no epartment of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were awas/were sufficient for approve	dopted by the members and the number of votes cast for the amendment(s) al.	

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 7-4-6020
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)
THOMAS L. MOORE
(Typed or printed name of person signing)
CHAIRMAN OF THE BOARD (Title of person signing)
(The or person signing)