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2017 AUG TO P 4: 06



COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: $SPRII$	UNIST CHAPEL of Melbouenes
DOCUMENT NUMBER: W 0600	000 9438
The enclosed Articles of Amendment and fee are subr	nitted for filing.
Please return all correspondence concerning this matter	er to the following:
PAUL A.	MATTFeld - Papes (Name of Contact Person)
	Chapel of Melbourne Inc
P.O. Box	# 1052
	(Address)
Melbour	NE, FL. 32901-1052 (City/ State and Zip Code)
PMATTA	ELD44 @ AOLICOM
E-man address. (to be used	To Tuture annual report nonnearony
For further information concerning this matter, please	call:
PAUL A. MATTFELD	at (772) 663-1267 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:
\$35 Filing Fee Certificate of Status	□\$43.75 Filing Fee & □\$52.50 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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation
of

The SPIRITUALIST CHAPI	EL OF Melbourne Inc
(Name of Corporation as currently filed with the Flor	ida Dept. of State)
N 060 0000 943	· · · · · · · · · · · · · · · · · · ·
(Document Number of Corpora	tion (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	on:
- No Chang	eThe new
name must be distinguishable and contain the word "corporate "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable:	on" or "incorporated" or the abbreviation "Corp." or "Inc." No change
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box # 1052 Melbouene, Fl. 32901-1052
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac	ldress:
Name of New Registered Agent: NO	chang l
New Registered Office Address:	Florida street address)
	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan	Agent: niliar with and accept the obligations of the position.
Signature of New Regist	ered Agent, if changing

Page 1 of 4

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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: XChange X Remove X Add	<u>V</u> <u>Mi</u>	<u>in Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1)Change	P	Ben Beecher	122 CAKhave
Add			CAPE CANAVERAL FL 32920
2)Change	<u>D</u>	Catherine Curtis	Melbourne, FL.
Remove 3) Change Add	<u>D</u>	JOAN H. HOLMES	32935 1582 - VAU CAMP Ave, St E PALM BAY, FL,
Remove 4)Change	<u>D.</u>	JOAN CRUZ	32934 560 Avondale Road PALM BAY, Fl. 32907
Remove 5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
(auacn adamonal s					
	NO	change			
	.				
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		<u>.</u>		<u> </u>	
		<u>-</u>			
	 .				

7/31/12

Effective date if applicable:				
	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
☐ The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast for the amendment(s) al.			
There are no members or mem adopted by the board of direct	abers entitled to vote on the amendment(s). The amendment(s) was/were tors.			
Dated Signature	July 2012 Paul G Matifeld - Pres.			
(By the chai have not be	rman or vice chairman of the board, president or other officer-if directors cen selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)			
	PAUL A. MATTFELD			
	(Typed or printed name of person signing)			
	PRES. dent - PRIMARY Agent (Title of person signing)			
	(Title of person signing)			