N07000003540

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations Archdiocese of Florida, Inc. N1)7000003540 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Julie McKellop Archdiocese of Florida, Inc. 4475 NS Hwy 1 S., Ste 506 St. Augustine FL. 32086 E-mail address: (to be used for future annual report hotification) For further information concerning this matter, please call: Sulie McKellon at (904) 408-8697

(Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ∠□\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee

Certified Copy

enclosed)

(Additional copy is

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Certificate of Status

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Certificate of Status

(Additional Copy is Enclosed)

Certified Copy





May 7, 2013

JULIE MCKELLOP 4475 US HWY 1 S., STE 506 ST. AUGUSTINE, FL 32086

SUBJECT: ARCHDIOCESE OF FLORIDA, INC.

Ref. Number: N07000003540

We have received your document for ARCHDIOCESE OF FLORIDA, 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):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

The document is illegible and not acceptable for imaging.

Section 607.0120(4), 617.01201, or 608.4081, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

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.

Carol Mustain Regulatory Specialist II

Letter Number: 513A00011109

Articles of Amendment to Articles of Incorporation

Archdiocese of Florida Inc.,

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

NO700003540

(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 Anticles of Incorporation:

A. If amending name, enter the new name of the corporation:

Diocese of Florida Tuc, 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)

Suite #506

St. Augustine, FL. 33086

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:

NAME of New Registered Agent Agent:

NAME of New Registered Agent Agent Agent Agent

.

New Registered Office Address:

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position

Signature of New Registered Agent, if changing

(Florida street address)

 • 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s	
1) Change Add Remove	Ρ	<u>C. Wag</u>	ne Free berg, Dr	st. Augus	Esquire Lane tine, Fl. 32092
2) Change Add Remove					
3) Change Add Remove		_			
4) Change Add Remove	 	<u> </u>			
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)			
NA				
1				
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The	date of each amendment(s) adoption: March 18, 2013
Effe	ective date if applicable: March 18, 2013
	(no more than 90 days after amendment file date)
Ada	option of Amendment(s) (<u>CHECK ONE</u>)
Ø	The amendment(s) was/were adopted by the members and the number of votes east 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 July 5, 2013
	Signature Julie McKellop
	(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)
	Julie McKellop
	(Typed or printed name of person signing)
	Secretary/Treasury
	(Title of person signidg)