

No 7000003913

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

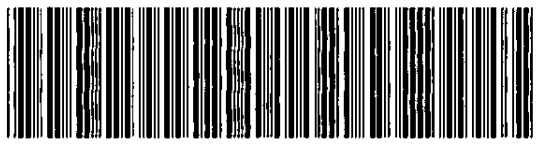
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 FEB 27 AM 11:55

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: FELLOWSHIP OF THE HILLS, INCORPORATED

DOCUMENT NUMBER: N07000003913

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRIAN BROWN

(Name of Contact Person)

FELLOWSHIP OF THE HILLS

(Firm/ Company)

930 THOMASVILLE RD, SUITE 106

(Address)

TALLAHASSEE, FL 32303

(City/ State and Zip Code)

For further information concerning this matter, please call:

BRIAN BROWN

(Name of Contact Person)

at ( 250 ) 228-9273

(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 &  
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

**Street Address**

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

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

09 FEB 27 AM 11:55

FELLOWSHIP OF THE HILLS, INCORPORATED  
(Name of Corporation as currently filed with the Florida Dept. of State)

N07000003913

(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:**

*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)

930 THOMASVILLE RD  
SUITE 106  
TALLAHASSEE, FL 32303

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

930 THOMASVILLE RD  
SUITE 106  
TALLAHASSEE, FL 32303

**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:**

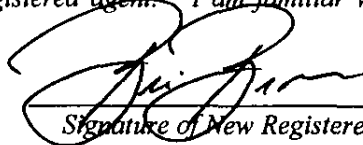
Name of New Registered Agent: BRIAN BROWN

New Registered Office Address: 930 THOMASVILLE RD STE 106  
(Florida street address)

TALLAHASSEE, Florida 32303  
(City) (Zip Code)

**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

**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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PRES-DIR</u>	<u>ROBERT SCOTT WATHERFORD</u>	<u>3302 JOHN HANCOCK</u> <u>TALLAHASSEE FL</u> <u>32312</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>PRES-DIR</u>	<u>BRIAN BROWN</u>	<u>2127 SUNLIGHT TERRACE</u> <u>TALLAHASSEE, FL</u> <u>32311</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VICE PRES-DIR</u>	<u>JEREMY BOESERT</u>	<u>3498 LANDS END LN</u> <u>TALLAHASSEE, FL</u> <u>32317</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**

*(attach additional sheets, if necessary). (Be specific)*

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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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>DIR</u>	<u>TARA WEATHERFORD</u>	<u>3302 JOHN HANCOCK</u> <u>TALLAHASSEE, FL</u> <u>32312</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>DIR</u>	<u>TAMI BROWN</u>	<u>2127 SUNLIGHT TERRACE</u> <u>TALLAHASSEE, FL</u> <u>32311</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

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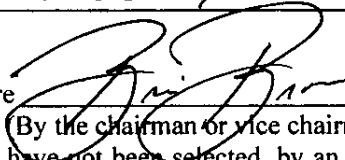
The date of each amendment(s) adoption: 2-26-09

Effective date if applicable: 2-26-09  
(no more than 90 days after amendment file date)

Adoption 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 2-26-09

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)

BRIAN BROWN  
(Typed or printed name of person signing)

VICE PRESIDENT  
(Title of person signing)