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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Calvary Chapel Clermont, FL, Inc.
DOCUMENT NUMBER: N0700005865
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Carlos Aviles, Jr. (Name of Contact Person)
Calvary Chapel Clermont, FL. Inc.
202 Hatteras Avenue
Clermont Florida 34711
(City/ State and Zip Code) CC CLermon + FL @ gmail. Com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Carlos Aviles Jr. at 352 978-9511 (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
Mailing Address Amendment Section Amendment Section Division of Comparting

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to

FILED

	Articles of Incorporation of	16 JAN -4 AM 7: 10
Calvary Chape	el Clermont,	FEECHTIME OF STATE
(Name of Corporation a	s currently filed with the Florids	Dept. of State
N0700	00005865	
	nt Number of Corporation (if know	vn)
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	da Statut e s, this <i>Florida Not For P</i>	rofit Corporation adopts the following
A. If amending name, enter the new name of the c	eorporation:	<i>A</i>
name must be distinguishable and contain the word "	'cornoration" or "incornorated"	The new
"Company" or "Co." may not be used in the name.	corporation of incorporated c	in the accretional corp. of the.
B. Enter new principal office address, if applicabl	le: Λ / /	Λ
(Principal office address MUST BE A STREET AD		
C. Enter new mailing address, if applicable;	. 1	
(Mailing address MAY BE A POST OFFICE BO	p(x) = p(A)	
		
D. If amending the registered agent and/or registered agent and/or the new registered		ter the name of the
	, , /	
Name of New Registered Agent:	N/A	
_	Florie	la street address)
New Registered Office Address:	(1 101 11	a sirec caaressy
		. Florida
-	(City)	(Zip Code)
New Desistened Agent's Signature if showing De	aistoned Agants	, J
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	I am familiar with and accept the	obligations of the position.
· · · · · · · · · · · · · · · · · · ·		
	Signature of New Registere	ed 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)

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 Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Address</u> s
l) Change Add Remove	SD James Wilder	2481 LINKWOOD AVENUE CLERMONT, FLORIDA 34711
2) Change Add Remove 3) Change Add	SD Kevin Ballard	960 S US Hwy 41 Inverness, Florida 34450
Remove 4) Change Add Remove		
5) Change Add Remove		
6) Change Add		

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
(attach additional sheets, if necessary).	(Be specific)			
		}		
•		NA		
		(V) / C	 	
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			w	
				

The date of each amendment(s) adopti	on:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block d document's effective date on the Department.	oes not meet the applicable statutory filing requirements, this date will no nent of State's records.	t be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	
There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
Dated 12	2/23/15	
Signature	elle	
have not been se	or vice chairman of the board, president or other officer-if directors elected, by an incorporator – if in the hands of a receiver, trustee, or binted fiduciary by that fiduciary)	
**************************************	Carlos Avijes Jr. (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	