

N07 000009787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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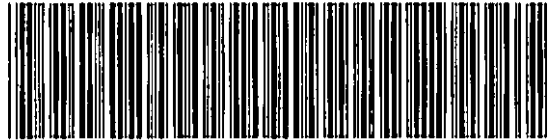
(Business Entity Name)

(Document Number)

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2022 MAR -7 PM 2:42

SEC. DIV. OF STATE
TALLAHASSEE, FL

3/14/2022

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Campus Crusade for Christ Oceania, Inc.

DOCUMENT NUMBER: N07000009787

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

Please return all correspondence concerning this matter to the following:

KeNosha Whitehead, Staff Attorney

(Name of Contact Person)

Campus Crusade for Christ, Inc. c/o General Counsel's Office

(Firm/ Company)

100 Lake Hart Drive, MC 3500

(Address)

Orlando, FL 32832

(City/ State and Zip Code)

GCOcorporate@cru.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barbara Bouchard

407

□ 826-2047

at

(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:

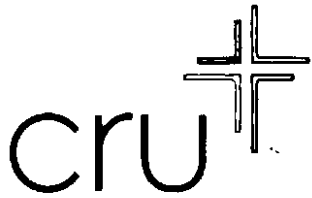
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|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



CAMPUS CRUSADE FOR CHRIST

MEMORANDUM

TO: Amended Section Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street
Suite 810
Tallahassee, FL 32303

FROM: Nadia Bonilla, Corporate Paralegal
Campus Crusade for Christ/Cru General Counsel's Office

DATE: March 2, 2022

RE: Campus Crusade for Christ Oceania, Inc.
Florida Document No. No7000009787
Corporate Name Change

Attached please find *Articles of Amendment to Articles of Incorporation*, to be filed for the purpose of changing the Corporation's name to **Campus Crusade for Christ, North America & Oceania, Inc.** effective upon filing of the Amendment. Also enclosed is our check in the amount of \$43.75 (#270518) to cover the filing fee and a Certificate of Status. Please mail and/or email the Certificate of Status to:

KeNosha Whitehead, Staff Attorney
Campus Crusade for Christ
Cru General Counsel's Office
100 Lake Hart Drive
MC 3500
Orlando, FL 32832
GCOcorporate@cru.org

If you have any questions, please let us know.

Thank you.

*General Counsel's Office
100 Lake Hart Drive – 3500
Orlando, FL 32832
407-826-2047
407-854-1218 Fax*

Articles of Amendment
to
Articles of Incorporation
of

FILED

Campus Crusade for Christ Oceania, Inc.

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

2022 MAR -7 PM 2:42

N07000009787

SECRETARY OF STATE
TALLAHASSEE, FL

(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:

Campus Crusade for Christ, North America & Oceania, Inc.

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:

n/a

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

n/a

(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:

n/a

n/a

(Florida street address)

New Registered Office Address:

_____, Florida _____
(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)

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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
6) <input type="checkbox"/> Change <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)

n/a _____

☒ 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 2/25/2022

Signature DocuSigned by:
Mark A. Gauthier
c994331472c044c

(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)

Mark A. Gauthier

(Typed or printed name of person signing)

President of Campus Crusade for Christ Oceania, Inc.

(Title of person signing)