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R. WHITE 80V 1 7 2017 FILED 17 NOV 16 PH 2: 20

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: FEllsmell Community Prayer WORShip And Beschool To
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
NAMIE MAE BROWN (Name of Contact Person)
(Firm/ Company)
1025 West BRANT (Address)
FEIISMERE FLORIDAS 32949 (City/ State and Zip Code)
GUCCINIZOLU 57/ QUINDO COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Nume of Contact Person) (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: \$\Begin{align*} \text{\$\frac{1}{2}\$} \te
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

FILED

•	Articles of Incorporation of	17 NOV 16 PH 2: 28	
FCIISMERE COMMUNITY	= -	ud Store Ship And Pre	School Int
	1005765	iorida Dept. 01 State)	
	nt Number of Corporation (if	f known)	
	, ,	,	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida Not</i> .	For Profit Corporation adopts the following	
A. If amending name, enter the new name of the co	rporation:		
FCISMERE. Community name must be distinguishable and contain the word "company" or "Co." may not be used in the name.	orporation" or "incorpora	NUA PRESCHOOF THE new ted" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>x</u>)		
D. If amending the registered agent and/or register new registered agent and/or the new registered		a, enter the name of the	
Name of New Registered Agent:			
New Registered Office Address:		(Florida street address)	
		, Florida	
-	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent. I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and acce	pt the obligations of the position.	
	Signature of New Reg.	istered 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 Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove			
2) Change Add			
Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add Remove		- -	
KCHIOVC		-	

ttach additional sheets, if necessary).	(Be specific)					
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The date of each amendment(s) adoption:/ date this document was signed.	Hugust 23, 2017	, if other than the
	iust 24, 2017	
(no mdr	re than 90 days after amendment file date)	
Note: If the date inserted in this block does not me document's effective date on the Department of Sta	eet the applicable statutory filing requirements, this date wi ate's records.	ill not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
The amendment(s) was/were adopted by the mas/were sufficient for approval.	members and the number of votes cast for the amendment(s	\$)
There are no members or members entitled to adopted by the board of directors.	vote on the amendment(s). The amendment(s) was/were	
→	23, 4017	
Signature Amnes Ma	e brown	<u>.</u>
(By'the chairman or vice ch	hairman of the board, president or other officer-if directors	
have not been selected, by other court appointed fiduc	an incorporator – if in the hands of a receiver, trustee, or	
other court appointed riduc	ciary by mar noderary)	
MANIE	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
\circ		
PRO	SIdent	
	(Title of person signing)	

COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: Fellsmere, Community Prayer Worship And Preshed:
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
NAMIE 1/17 E BROWN (Name of Contact Person)
(Name of Contact Person)
(Firm/ Company)
(Address)
FELISMERE FLORIDO 32949 (City/ State and Zip Code)
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at 772 - 571 - 4659 (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& \Bigcup \\$43.75 Filing Fee \& \Bigcup \\$52.50 Filing Fee \\ Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)
Mailing Address Street Address

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