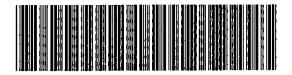
M0800006412

(Re	equestor's Name)	
(Ac	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	. MAIL
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Ameral C.COULLIETTE

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Firs T. Ch.	ristian Church of Galillea Inc
DOCUMENT NUMBER:	2006412
The enclosed Articles of Amendment and fee are subr	mitted for filing.
Please return all correspondence concerning this matte	er to the following:
Resemond	Telisca
(Nam	ne of Contact Person)
(Firm/ Company)
403 NF	6th Ave #2
	(Address)
Boynton	Beach FL 33435 (State and Zip Code)
E-mail address: (to be used	ra ComCast net for future annual report notification)
For further information concerning this matter, please	call:
Rosemond Telisca (Name of Contact Person)	at (954) 444-73 13 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:
\$35 Filing Fee \$\Boxed{\subseteq}\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 21, 2011

ROSEMOND TELISCA 403 NE 6TH AVE #2 BOYNTON BEACH, FL 33435

SUBJECT: FIRST CHRISTIAN CHURCH OF GALILLEA, INC.

Ref. Number: N08000006412

We have received your document for FIRST CHRISTIAN CHURCH OF GALILLEA, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

It is unclear what you are wishing to with the person listed on your document as TD. Do you wish to remove one of the directors you currently have and add this person or just show them on your amendment filing. We only have room for 6 people on the detail screen so you would need to specify the 6 people you want listed on your detail screen in the area for officers/directors on page 2. I am sending a list of the current officers and directors we are showing on our records at this time.

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) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 611A00026249

HECHVEU 11 DEC 19 AM 9: 12

Articles of Amendment to

	ncorporation of		
First Christian Chi	urch of Gai	lillea, Inc	
(Name of Corporation as currently	filed with the Florida Dep	ot. of State)	
N080000041	2_		
(Document Number of Corpo	ration (if known)		
Pursuant to the provisions of section 617.1006, Florida Statut following amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Pr</i>	ofit Corporation adopts t	the
A. If amending name, enter the new name of the corpora	tion:		
The new name must be distinguishable and contain the word "Corp." or "Inc." "Company" or "Co," may not be used in		rated" or the abbreviatio	<u> </u>
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			alvisiok of 0
D. If amending the registered agent and/or registered off		er the name of the	51 & 141
new registered agent and/or the new registered office a	<u>iddress:</u>		
Name of New Registered Agent:		<u></u>	
New Registered Office Address:	(Florida street address)		
		, Florida	
	(City)	(Zip Code)	·
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		obligations of the position	7 .
•			Ą
Signature of New Regis	tered Agent, if changing		f 3

Page 1 of 4

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	ŕ	Facilia Occius		Address 707 SW 3rd AVE Boynton Beach FC 33426 (561) 577-4210
2)			_	[561] \$77-9210'
3)			_	
4)				
5)				
6)				
I <u>f REMOVIN</u>	G an office	er and/or (lirector, please list the	e title(s) and	I name of the officer/director to be removed:
<u>Fitle(s)</u>	<u>Name</u>		Title(s)	<u>Name</u>
1)			4)	
2)			5)	
• •				

E. Af amending or adding additional Artical (attach additional sheets, if necessary). W/A			
		<u> </u>	
			
			· - · · · · · · · · · · · · · · · · · ·
	-		
			-
<u> </u>			

The date of each amendment(s) adoption:
Effective date if applicable: (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 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)
(Typed or printed name of person signing) President + Senior Pastor (Title of person signing)

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