

ND9000006619

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

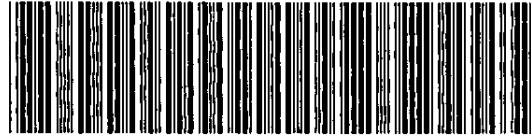
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 JUL 19 PM 12:50

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C. LEWIS

JUL 23 2013

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 2, 2013

MS. ANESHIA S. HINES / CHILDREN OF PURPOSE CHRISTIAN
2250 PALM BEACH LAKES BLVD SUITE 116
WEST PALM BEACH, FL 33409

SUBJECT: CHILDREN OF PURPOSE CHRISTIAN ACADEMY, INC.
Ref. Number: N09000006619

We have received your document for CHILDREN OF PURPOSE CHRISTIAN ACADEMY, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

If you have any further questions concerning your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II
Amendment Section

Letter Number: 613A00016390



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 3, 2013

MS. ANESHIA S. HINES / CHILDREN OF PURPOSE CHRISTIAN
2250 PALM BEACH LAKES BLVD SUITE 116
WEST PALM BEACH, FL 33409

SUBJECT: CHILDREN OF PURPOSE CHRISTIAN ACADEMY, INC.
Ref. Number: N09000006619

We have received your document for CHILDREN OF PURPOSE CHRISTIAN ACADEMY, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 613A00016390

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Children of Purpose Christian Academy Inc.

DOCUMENT NUMBER: NO9000006619

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

Please return all correspondence concerning this matter to the following:

Ms Aneshia S. Hines

(Name of Contact Person)

Children of Purpose Christian Academy Inc.

(Firm/ Company)

2250 Palm Beach Lakes Blvd, Suite #116

(Address)

West Palm Beach, Florida 33409

(City/ State and Zip Code)

childrenpb@aol.com

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

For further information concerning this matter, please call:

Dr. Lynn M. Allen

(Name of Contact Person)

at (561) 659-7721

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Children of Purpose Christian Academy Inc.

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

NC9000006619

(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)

C. Enter new mailing address, if applicable:
(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:

Denise Neal
2250 Palm Beach Lakes Blvd., Ste #116
(Florida street address)

New Registered Office Address:

West Palm Beach, Florida 33409
(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.

Denise Neal
Signature of New Registered Agent, if changing

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TALLAHASSEE, FLORIDA

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action
(Check One)

Title

Name

Address

- | | | | |
|--|------------|--------------------------|---|
| 1) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>P</u> | <u>Lynn M. Allen</u> | <u>2250 Palm Beach Lakes Blvd.</u>
<u>Suite #116</u>
<u>West Palm Beach, FL 33409</u> |
| 2) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>VP</u> | <u>Reynalda Charlot</u> | <u>2250 Palm Beach Lakes Blvd.</u>
<u>Suite 116</u>
<u>West Palm Beach, FL 33409</u> |
| 3) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>P</u> | <u>Aneshia S. Hines</u> | <u>2250 Palm Beach Lakes Blvd.</u>
<u>Suite 116</u>
<u>West Palm Beach, FL 33409</u> |
| 4) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>VP</u> | <u>Yanick Charlot</u> | <u>2250 Palm Beach Lakes Blvd</u>
<u>Suite 116</u>
<u>West Palm Beach FL 33409</u> |
| 5) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>CFO</u> | <u>Javian Bryant</u> | <u>2250 Palm Beach Lakes Blvd.</u>
<u>Suite 116</u>
<u>West Palm Beach, FL 33409</u> |
| 6) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | <u>CEO</u> | <u>Nateisha C. Hines</u> | <u>2250 Palm Beach Lakes Blvd.</u>
<u>Suite 116</u>
<u>West Palm Beach, FL 33409</u> |

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no text or other markings on the paper.

The date of each amendment(s) adoption: July 12, 2013

Effective date if applicable: _____
(no more than 90 days after amendment file date)

FILED

13 JUL 19 PM 12:50

Adoption of Amendment(s) (CHECK ONE)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- ☒ 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 July 12, 2013

Signature Dr. Lynn M. Allen
(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)

Dr. Lynn M. Allen
(Typed or printed name of person signing)

Acting President
(Title of person signing)