## 19000001997)

(Re	questor's Name)	)
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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MAY 06 2015

R. White



## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 22, 2015

NADINE KING 603 OCEAN MARINA DR FLAGLER BEACH, FL 32136

SUBJECT: CHRISTMAS COME TRUE, INC.

Ref. Number: N09000006997

We have received your document for CHRISTMAS COME TRUE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

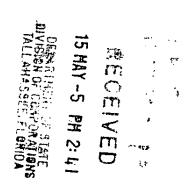
Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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.

Rebekah White Regulatory Specialist II

Letter Number: 315A00008149



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Christal	ms Come Tru	е	
DOCUMENT NUMBER: NO90000	06997		
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this r	natter to the following:		
Nadine King			
	(Name of Contact Persor	n)	
<b>Christmas Come True</b>			
	(Firm/ Company)		
603 Ocean Marina Dri	ve		
	(Address)		
Flagler Beach, FL 321	36		
	(City/ State and Zip Code	e)	
Christmascome	true@gmail.c	om	
E-mail address: (to be	used for future annual report	notification)	
For further information concerning this matter, ple	ease call:		
Nadine King	<sub>at</sub> 386	569-4429  ode & Daytime Telephone Number)	
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)	
Enclosed is a check for the following amount made	de payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta	e & □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address		Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations	
P.O. Box 6327 Tallabassee, FL 32314		Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

### Articles of Amendment to Articles of Incorporation of

FillB

15 MAY -5 FH 2: 07

# Christmas Come True (Name of Corporation as currently filed with the Florida Dept. of State) N0900006997 (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:

name must be distinguishable and contain the word "corporation" or "inco "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)	orporated" or the abbreviation "Corp." or "
B. Enter new principal office address, if applicable:	
b. Enter new principal office address, if applicable:	
	<u> </u>
Untowney mailing address if applicables 2.1.5	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  N/A	
. 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	
nume of New Negisterea Agem.	10-10-10-10-10-10-10-10-10-10-10-10-10-1
· ·	address)
New Registered Office Address.	
	, Florida
(City)	(Zip Code)
law Degistered Agent's Signature if changing Degistered Agent	
hereby accept the appointment as registered agent. I am familiar with a	ad accept the obligations of the position.
Name of New Registered Agent:  (Florida street of New Registered Office Address:  (City)  New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with an	, 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 us an Add.

Example: X Change X Remove X Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
Change  Add  Remove	D	Edward King	603 Ocean Marina Dr Flagler Beach FL 32136
2) Change Add	D	Thomas Nicholson	158 Brentwood Rd Exeter,NH 03833
Remove 3) Change Add	TD_	Joyce Dofler	4 Rykill Way Palm Coast, FL 32164
Remove 4) Change Add			
Remove  5) Change  Add			
6) Change Add Remove	<del></del>		

E. If amending or adding additional Article (attach additional sheets, if necessary).	cles, enter change(s) here (Be specific)
N/A	
<del> </del>	<del></del>

The date of each amendment(s) ac date this document was signed.	loption: NA	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s) al.	
There are no members or members adopted by the board of director	bers entitled to vote on the amendment(s). The amendment(s) was/were ors.	
have not be	man or vice chairman of the board, president or other officer-if directors en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
	Typed or printed name of person signing)  xecutive Director  (Title of person signing)	