# N10000001439

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05/05/14--01008--007 \*\*43.75

14 MAY -5 PH 2:50

C. LEWIS

MAY 1 4 2014

EXAMINER

APPMOVED

TO: Amendment Section Division of Corporations

The Church at South Lake Community Ministries, Inc. NAME OF CORPORATION:

N10000001439

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

Please return all correspondence concerning this matter to the following:

# Brian Hammond

(Name of Contact Person)

# The Church at South Lake Community Ministries, Inc.

(Firm/ Company)

PO Box 121023

(Address)

Clermont, FL 34712

(City/ State and Zip Code)

# brian@churchatsouthlake.com

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

For further information concerning this matter, please call:

Annette Smith

(Name of Contact Person)

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

Certificate of Status

□ \$35 Filing Fee □\$43.75 Filing Fee & ■\$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**

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

14 MAY -5 PM 2:50

SECRETARY OF STATE JALLAHASSEE, FLORIDA

The Church at South Lake Com	munity Ministries, Inc.
(Name of Corporation as currently filed with the Flo	rida Dept. of State)
N1000001439	
(Document Number of Corpora	ation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute mendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	ion:
South Lake Community Ministries	s, Inc.
name must be distinguishable and contain the word "corporate" "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable:	1860 Hancock Rd.
Principal office address <u>MUST BE A STREET ADDRESS</u>	Clermont, FL 34711
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 121023
	Clermont, FL 34712
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fail	
Signature of New Regis	tered Agent, if changing

Page 1 of 4

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 D           V         Mike John S           SV         Sally S	<u>ones</u>	
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			

If amending or adding additional Arts (attach additional sheets, if necessary).	(Be specific)
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<del></del>	<del></del>
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APPROVED AND FILED

	FILED
The date of each amendment(s) adoption: 4-28-/	14 MAY -5 PM 2: 50
Effective date if applicable: (no more than 90 days of	SECRETARY OF CHAIL fter amendment file date)ALLAHASSEE, PLERID:
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the was/were sufficient for approval.	number of votes cast for the amendment(s)
There are no members or members entitled to vote on the ame adopted by the board of directors.	ndment(s). The amendment(s) was/were
Dated 4/28/2014	
Signature (By the chairman or vice chairman of the bo	pard president or other officer-if directors
have not been selected, by an incorporator other court appointed fiduciary by that fidu	- if in the hands of a receiver, trustee, or
David B. Hammond	
(Typed or printed name of per	son signing)
President	
(Title of person signing)	