# N/0000002005

•		
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Nam	е)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

Mend

1 6 2010



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 6, 2010

JESSICA WAGER-OLSSON 3523 HUNTERS TRAIL CIRCLE EUSTIS, FL 32726

SUBJECT: FIREHOUSE MINISTRY INC

Ref. Number: N1000002005

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

IS THE CORPORATION CHANGING ITS NAME?

100

The date of adoption of each amendment must be included in the document.

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) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 610A00008322



#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Firehouse Mir	nistry In	C		
DOCUMENT NUM	BER: N10000002005				
The enclosed Articles	of Amendment and fee are sub	omitted for	filing.		
Please return all corre	spondence concerning this mat	ter to the f	ollowing	<b>;</b> :	
		Wager-0			
	(Name of	Contact P	erson)		
	(Firm	n/ Compan	y)		
	3523 Hur	nters Trai	il Circle		
		Address)		<del> </del>	
		s, Fl. 327		,	
	(City/ Sta	te and Zip	Code)		
<u></u>	jesswage E-mail address: (to be use	r@hotm	ail.com e annual	report no	otification)
For further information	on concerning this matter, pleas	e call:			
Jessica Wager-O	sson	at (	407	<u> </u>	
(Name	of Contact Person)		(Area	Code & D	Daytime Telephone Number)
Enclosed is a check for	or the following amount made p	ayable to	the Flori	da Depar	tment of State:
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Certif	ied Copy tional co		☑ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. I	ng Address Idment Section Idment Sec		Ameno Divisio Cliftor	Address dment Secon of Corp Building	tion orations

Tallahassee, FL 32301

### Articles of Amendment to Articles of Incorporation

	of		AR TR
Fireho	use Ministry	Inc	SS 5
(Name of Corporation as cur	rently filed with	the Florida Dept. of St	- (1)
N1	0000002005		F STA
(Document Nu	umber of Corporat	ion (if known)	55
Pursuant to the provisions of section 617.1006 the following amendment(s) to its Articles of		, this <i>Florida Not For I</i>	Profit Corporation adopts
A. If amending name, enter the new name	of the corporatio	<u>n:</u>	
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company"			corporated" or the
B. Enter new principal office address, if an (Principal office address MUST BE A STRE			, - , - , - , - , - , - , - , - , - , -
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF		SA	
*			
D. If amending the registered agent and/or new registered agent and/or the new re	r registered office gistered office ad	address in Florida, en dress:	ter the name of the
Name of New Registered Agent:	Lawre	ence C. Olsson	<del>_</del>
New Registered Office Address:	(Flor	S A ida street address)	_
		(City)	, Florida (Zip Code)
New Registered Agent's Signature, if change I hereby accept the appointment as register position.			ept the obligations of the

Page 1 of 3

## 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)

**Title** <u>Name</u> Address **Type of Action** \_ 🗆 Add ☐ Remove \_ | Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) ad	loption: March 20th 2010
	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado was/were sufficient for approval.	opted by the members and the number of votes cast for the amendment(s)
There are no members or members adopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were s.
<sub>Dated</sub> March 20	oth 2010
Signature	aurence C.Dluora
(Bly the/cl have not	hairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or rt appointed fiduciary by that fiduciary)
	Lawrence C. Olsson
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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