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(Red	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer	
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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: SUNCOAST CENTER FOR
DOCUMENT NUMBER: N100000 4077 SPIRITUAL SPIRIT
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
BARIEY GARZA-MAPPES (Name of Contact Person)
SUNCUAST CENTER FOR SPIRITUAL
714, BEL AIR AVENUE LIVING
SUN CITY CETER FL 33573 (City/State and Zip Code)
BARLEY GM @ AU COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
BARIEY GARZA-MAPPES (513) 520-6349 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Matting Address

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

(Name of Corporation as	currently filed with the	e Florida Dept. of State)	1 1 2
VIIVUUUUUU	[[]		HV
(Documer	nt Number of Corporation	ı (if known)	
Dominate the resulting of aution 517 1005. Physics	n Cantatan thin Elawida A	let For Brafit Comparation ad	onto the Calleggine
Pursuant to the provisions of section 617.1006, Floridament(s) to its Articles of Incorporation:	a Statutes, this <i>Prortag I</i>	oi ror rroju Corporation ad	opis the tonowing
			T MON T
1. If amending name, enter the new name of the co	orporation:	1111111	IAMINA A
ENTER FUR SPIT	KII OHL	- FIA ING	The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" or "incorp	orated" or the abbreviation "	Corp." or "Inc."
	111		
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET ADI</u>			·
Frincipul office undress MOST BE A STREET ADI	<u> </u>		
			
C. Enter new mailing address, if applicable:	NA		
(Mailing address MAY BE A POST OFFICE BO			
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 If amending the registered agent and/or registered new registered agent and/or the new registered 		orida, enter the name of the	田 高
	K N		<u> </u>
Name of New Registered Agent:	NA.		
_			RE OF S
New Registered Office Address:		(Florida street address)	: 51 XATE
now regimered typice readiciss.	111		ی 0 س
_	(City)	, Florida (Zip C	(A)
	(City)	(гар С	oae)
New Registered Agent's Signature, if changing Reg		and the second	••
hereby accept the appointment as registered agent.	i am familiar with and a	eccept the obligations of the pe	sition.
		MA	
	Signature of New	NT\ Registered Agent, if changing	
	ingname by new	cognicion rigorii, ij changing	

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 De V Mike Jo SV Sally Sr	nes	NA
Type of Action (Check One)	Title	Name	<u>Addres</u> s
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 Articles, enter change(s) here (attach additional sheets, if necessary). (Be specific)	. 1
	$N \mid N$
	· · · · · · · · · · · · · · · · · · ·

	date of each amendment(s) adoption: OCTOBER 22, 2018, if other than the this document was signed.
Effe	ctive date if applicable: (no more than 90 days after amendment file date)
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the innent's effective date on the Department of State's records.
Ado	ption 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 2-10-19 FEBRUARY 10,2019
	Signature (By the chairman of 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)
	BARLEY GARZA - MAPPES (Typed or printed name of person signing)

PRESIDENT OF BOARD
(Title of person signing)