

N10000004077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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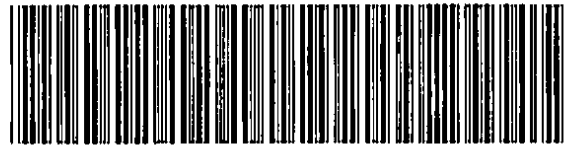
(Business Entity Name)

(Document Number)

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Amend

04/09/21--01018--017 **35.00

2021 JUL -9 PM12 01
SECRETARY OF STATE
TALLAHASSEE, FL 32399

FILED

JUL 2 2 2021

A RAMSEY



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 9, 2021

RICHARD EPPS
P.O. BOX 152613
TAMPA, FL 33684

SUBJECT: CENTER FOR SPIRITUAL LIVING TAMPA BAY, INC.
Ref. Number: N10000004077

We have received your document for CENTER FOR SPIRITUAL LIVING TAMPA BAY, 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):

A post office box is not an acceptable address for the registered agent.

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) 245-6051.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 421A00012725

RECEIVED
JUL 09 2021

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CENTER FOR SPIRITUAL LIVING TAMPA BAY INC.

DOCUMENT NUMBER: N10000004077

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

Please return all correspondence concerning this matter to the following:

RICHARD A. EPPS

(Name of Contact Person)

Center for Spiritual Living Tampa Bay

(Firm/ Company)

4501 E COLUMBUS DRIVE

(Address)

TAMPA, FL 33605

(City/ State and Zip Code)

RICHARD.EPPS@ROCKETMAIL.COM

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

For further information concerning this matter, please call:

RICHARD EPPS

863

581-3973

at

(Name of Contact Person)

(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 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

Center for Spiritual Living Tampa Bay, Inc.

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

N10000004077

(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:

NA

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: RICHARD A. EPPS

4501 E. COLUMBUS DRIVE

(Florida street address)

New Registered Office Address:

TAMPA

(City)

Florida 33605

(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.



Signature of New Registered Agent, if 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:

<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>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>GARZA-MAPPES, BARLEY</u>	<u>714 BEL AIR AVE</u> <u>SUN CITY CENTER FL. 33573</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>TR</u>	<u>REBUCK, DEB</u>	<u>6346 NEWTOWN CIRCLE</u> <u>UNIT A1</u> <u>TAMPA FL. 33615</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>EPPS, RICHARD</u>	<u>6613 SHADOW WOOD RUN</u> <u>LAKELAND FL. 33813</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>RUBINSAK, KIM</u>	<u>3806 VILLAS DEL SOL CT.</u> <u>TAMPA, FL 33609</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TR</u>	<u>CHRIST, BRITTANY</u>	<u>5311 72ND STREET E.</u> <u>PALMETTO, FL. 34221</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>TUENNERMAN, REBECCA</u>	<u>3113 W. POWHATAN AVE.</u> <u>TAMPA FL. 33614</u>

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

NA

The date of each amendment(s) adoption: 20210322, if other than the date this document was signed.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

☒ 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 20210327 _____

Signature _____


(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)

RICHARD A. EPPS

(Typed or printed name of person signing)

BOARD OF TRUSTEES PRESIDENT

(Title of person signing)