N10000005920

(Red	questor's Name)	
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(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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09/09/13--01013--005 **35.00

19 SEP -9 PH 1: 12

C. LEWIS SEP 1 7 2013 EXAMINER



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form for filing Articles of Amendment to amend the articles of incorporation of a Florida Not for Profit Corporation pursuant to section 617.1006, Florida Statutes. This is a basic amendment form and may not satisfy all statutory requirements for amending.

A corporation can amend or add as many articles as necessary in one amendment.

- > The original incorporators cannot be amended.
- > If amending the name of the corporation, the new name must be distinguishable on the records of the Florida Department of State. A preliminary search for name availability can be made through the Division's website at www.sunbiz.org. You are responsible for any name infringement that may result from your corporate name selection.
- > If amending the registered agent, the new agent must sign accepting the appointment and state that he/she is familiar with the obligations of the position.
- > If amending/adding officers/directors, list titles and addresses for each officer/director.

If a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

The document must be typed or printed and must be legible.

Pursuant to section 617.0123, Florida Statutes, a delayed effective date may be specified but may not be later than the 90th day after the date on which the document is filed.

Filing Fee \$35.00 (Includes a letter of acknowledgment)

Certified Copy (optional) \$8.75

Certificate of Status (optional) \$8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

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

For further information you may call the Amendment Section at (850) 245-6050

CR2E009 (7/13)

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 6RACE	GATHERING INC			
DOCUMENT NUMBER:	5920			
The enclosed Articles of Amendment and fee are submitt	ed for filing.			
Please return all correspondence concerning this matter to the following:				
ROBERT	NIEMAN ame of Contact Person)			
(N	ame of Contact Person)			
GRACE	GATHERING INC. (Firm/ Company)			
	(Firm/ Company)			
4000 E	Add a Daluc			
3903 C	4GLQ DRIVE (Address)			
	(Address)			
FORT PI	ERCE FLORIDA 34961			
FORT PIERCE FLORIDA 34961 (City/State and Zip Code)				
4				
ROBBIG, 7251 @ AOL . COM. F-mail address: (to be used for future annual report notification)				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
2				
ROBERT NIEMAN	at (<u>271</u>) <u>538 -4916</u> (Area Code & Daytime Telephone Number)			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount made payab	ole to the Florida Department of State:			
Description Devices in a Dis-	PA2 75 Pilling Pag 9.			
\$35 Filing Fee \$\Bigcup \square \text{\$43.75 Filing Fee & }\Bigcup \text{\$Certificate of Status}\$	\$43.75 Filing Fee & \$\square\$\$\$ \$\square\$\$\$ \$\square\$\$\$ \$\square\$\$\$\$ \$Certificate of Status\$\$\$\$\$\$			
	Additional copy is Certified Copy			
	enclosed) (Additional Copy is			
	Enclosed)			
Mailing Address	Street Address			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

FILED

GRACE GATHERING 1		13 SEP -9 PH 1: 12
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	Charles .
N 1000000 592	0	MILES STATE
(Document Number of C		##IBA
Pursuant to the provisions of section 617.1006, Florida Statutemendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Prof</i>	it Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	
NA		The ne
name must be distinguishable and contain the word "corpora	tion" or "incorporated" or t	he abbreviation "Corp." or "Inc.
'Company" or "Co." may not be used in the name.	4	
3. Enter new principal office address, if applicable:	SA GRACE	GATHERING INC
Principal office address <u>MUST BE A STREET ADDRESS</u>	50 50 h	CATHERING INC SIMBROWST.
	VERO BEA	ICH, 121 32958
Transport of the state of the s	(1	Veiman)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ROBERT N	AMAN
	5703 EAGL	9 DRIVE
		22, RL 34961
D. If amending the registered agent and/or registered off		the name of the
new registered agent and/or the new registered office a	Meiman	
Name of New Registered Agent: KOBSET	NAMAN'	
5103	EAGLE DRIVE	>
	(Florida street address)	
New Registered Office Address:		1 2011
PT P126	2CE	Florida <u>329</u> 3496/
(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:	
hereby accept the appointment as registered agent. I am fa	miliar with and accept the ob	oligations of the position.
Kalt	Va-	
Signature of New	Registered Agent, if changin	<u> </u>
5 ,		•

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	V Mik	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u> R.A.</u>	GORDON BICHTER	3823 14455. MICCO, FL 32976
Remove 2) Change	ρ	GORDON RICHTER	3823 144h St
Add			MICCO, FL 32976
3) Change Add Remove	<u>IR</u>	ADRIAN SCHGERSS.	MICCO, FL 32976
4) Change Add Remove	<u>IR</u>	J.D. COLE	8455 101 AVE. VERO BEACH, FL 32967
5) Change Add Remove	5/1	ANN RICHTER	3823 14455+. MICCO, PL 32970
6) Change Add Remove			

	date of each amendment(s)) adoption: <u>9-5-20/3</u>	, if other than the			
	this document was signed. ective date if applicable:	SEDT 5 2013	FILED			
<u>n appicazio</u> ,		(no more than 90 days after amendment fil	e date) 13 SEP - 9 PM 1:12			
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	SPICE LART OF STATE			
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.					
Ŕ	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	9-5-13				
	Signature	Koht Kan				
	have not	hairman or vice chairman of the board, president or o been selected, by an incorporator — if in the hands of urt appointed fiduciary by that fiduciary)				
		OBERT NISMAN				
(Typed or printed name of person signing)						
	REGISTERED AGENT Celebhorized Synature (Title of person signing)					
	(Title of person signing)					