

n10000009718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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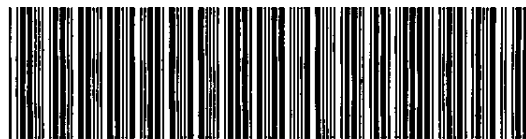
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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LEMEUX  
*[Signature]*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: FIRST COMMUNITY CHURCH OF GOD

DOCUMENT NUMBER: N10000009718

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

Please return all correspondence concerning this matter to the following:

CHARLES SMITH  
(Name of Contact Person)

\_\_\_\_\_  
(Firm/ Company)

6538 NW SELVITZ RD  
(Address)

PORT ST. LUCIE FL 34983  
(City/ State and Zip Code)

CHASBUSTA1@YAHOO.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHARLES SMITH at (772) 342-1346  
(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:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☒ \$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

FIRST COMMUNITY CHURCH OF GOD

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

N10000009718

(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:**

*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**)

6538 NW SELVITZ ROAD

PORT ST. LUCIE

FL 34983

**C. Enter new mailing address, if applicable:**  
(Mailing address **MAY BE A POST OFFICE BOX**)

SELVITZ ROAD

PORT ST. LUCIE

FL 34983

**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:

New Registered Office Address:

(Florida street address)

(City)

Florida  
(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

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(Attach additional sheets, if necessary)

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

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The date of each amendment(s) adoption: JANUARY 27<sup>TH</sup> 2014  
(date of adoption is required)

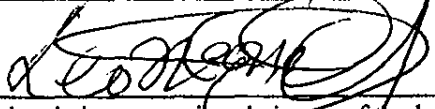
Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Adoption of Amendment(s) (CHECK ONE)**

☐ The amendment(s) was/were 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 JAN. 27<sup>TH</sup> 2014

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)

LEO McDONALD  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)