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



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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION: ISOTOPIA FUC
DOCUMENT NUMBER: N 100000 11526
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Pastor Wais Forbes (Name of Contact Person)
(Name of Contact Person)
King's River Christian Church (Firm/Company)
J (Firm/ Company)
4444 Sth St W (Address)
(Address)
Brodenton, FL, 34207 (City/State and Zip Gode)
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at ( 941 ) 726-743 (Area Code & Daytime Telephone Number)
(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 & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee & □ Certificate of Status (Additional copy is enclosed) □ 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 o	of Incorporation	
Isoro	oia Inc	of	
(Name of Corporation as current			
•	0011526	· · · · · · · · · · · · · · · · · · ·	
	t Number of Corporat	ion (if known)	
Pursuant to the provisions of section 617. amendment(s) to its Articles of Incorporat	1006, Florida Statutes, ion:	this Florida Not For Profit Corpo	pration adopts the following
A. If amending name, enter the new na	me of the corporation	n:	
Kina's		istian Church In	C The new
name must be distinguishable and contain	the word "corporation	on" or "incorporated" or the abbr	eviation "Corp." or "Inc."
"Company" or "Co." may not be used in	the name	launtil en Oli	
B. Enter new principal office address,		4444 Sth Sti	<u>N</u>
(Principal office address MUST BE A ST	<u> (REET ADDRESS</u>	Bradenton, FL	34207
	_	,	
	-		
C. Enter new mailing address, if applie (Mailing address MAY BE A POST (		4444 5th Sth	1
(		Padada El	341 27
		DIAGONAN) PL	51201
	-		
D. If amending the registered agent and			ne of the
new registered agent and/or the new	registered office add	<u>lress:</u>	
Name of New Registered Agent:	N/A		
New Registered Office Address:	(F	lorida street address)	
	NA	. ra. 11.	
	(City)	, Florida <i>(Zip C</i>	
New Registered Agent's Signature, if ch			·
I hereby accept the appointment as registe	red agent. I am fami	gent. liar with and accept the obligation	s of the position.
Sign	nature of New Register	red Agent, if changing	=+
J			ZEI SE

Page 1 of 4

FILED

111 MAY -9 P 4: 26

ECRETARY OF STATE LLAHASSEE. FLORIDA

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 <math>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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
Change Add Remove	7	Carrie Kieler	5115 42nd St. Cir. h Apt 106 Brodenton, Fl 34210
2) Change Add Remove			
3 ) Change Add Remove		_	
4) Change Add Remove		<u> </u>	
5) Change Add Remove		<u> </u>	**************************************
6) Change Add Remove			

If amending or adding additional Art attach additional sheets, if necessary).	(Be specific)	<del></del>	
N/A			
•			
			<del> </del>
· .			
<u>,                                      </u>			
		<del> </del>	
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The date of each amendment(s) adoption:		
Effec	ctive date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
Ador	ption of Amendment(s) ( <u>CHECK ONE</u> )	
	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 5-3-12	
	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)	
	Curtis Forbes	
	(Typed or printed name of person signing)  Director Rastor  (Title of person signing)	