N10666

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Leonard Street Chure i:	ch of God	·			===
	10666					
DOCUMENT NUMBER:						
The enclosed Articles of Amer	idment and fee are sub-	mitted for filing.				
Please return all correspondence	ce concerning this matte	er to the following:				
Sandra L Fagin						
		(Name of Contact P	erson)			
		(Firm/ Compan	y)			
22030 Ayers Road						
		(Address)				
Brooksville FL 34604						
		(City/ State and Zip	Code)			
fagin.sandra@gmail.com						
E-n	nail address: (to be used	for future annual re	port noti	fication		
For further information concer	ning this matter, please	call:				
Sandra L. Fagin		a	352 I		345-5466	
(1)	lame of Contact Person			Code)	(Daytime Telep	hone Number)
Enclosed is a check for the following	owing amount made pa	ayable to the Florida	Departm	ent of S	State:	
■ \$35 Filing Fee C	343.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Ade	dress	Sı	reet Add	iress		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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	7,1
Leonard Street Church of God	
(Name of Corporation as currently filed with the Florida Dept. of State)	
N10666	iņ- 0
(Document Number of Corporation (if known)	0 V
Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation ado amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "C "Company" or "Co." may not be used in the name.	The new or "Inc."
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: JULI Blownt, Sr.	
27/78 Aubrey Avenue New Registered Office Address: Brooksville, Florida (City) (Zip Cod.)	34602
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 pos	
Signature of New Registered Agent, if changing	
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: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Si	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	TR	Joel Blount, Sr.	27178 Aubrev Avenue Brooksville, FL 34602
Remove			
2) Change Add			
Remove 3) Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	g additional Arti ts, if necessary).	icles, enter change(s) here: (Be specific)	
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	 	·- ·- ·- ·	-				
The date of each amendment	t(s) adoption:	08/08/2022		 	-		if other than the
date this document was signed	.						
Effective date if applicable:	08/08/2022						
		o more than 90 c		-			
Note: If the date inserted in the document's effective date on the				ry filing requir	ements, this date	e will not be	listed as the
Adoption of Amendment(s)	(9	CHECK ONE)					
The amendment(s) was/w was/were sufficient for ap		the members a	nd the number	of votes cast f	for the amendme	ent(s)	

	pers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.
Dated	08/08/2022
Signature	Janha Lagn
(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)
	Sandra L. Fagin
	(Typed or printed name of person signing)
	Treasurer
	(Title of person signing)

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