N110000002702

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	#)
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C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: ORTHODOX ANG	LICAN MISSION S	OCIETY, INC	
N11000002702 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matte	r to the following:		
REV. FR. MARK ROWE			
	(Name of Contact Pe	erson)	
ROCOR WESTERN RITE COMMUNITIES, INC.			
	(Firm/ Company	7)	
5625 GRANADA DR # 267			
	(Address)		
SARASOTA, FLORIDA 34231			
	(City/ State and Zip	Code)	
FR.MARKROWE@GMAIL.COM			
E-mail address: (to be used	for future annual rep	ort notification	n)
For further information concerning this matter, please	call:		
FR. MARK ROWE	at	(941)	914-2890
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida I	Department of	State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status	_	Certif s Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



ORTHODOX ANGLICAN MISSION SOCIETY, INC.		15 NOV -5 AM 10: 5
(Name of Corporation as curr	ently filed with the Floric	a Dept. of State)
N11000002702		
(Document Nur	mber of Corporation (if kno	wn)
Pursuant to the provisions of section 617.1006, Florida Statemendment(s) to its Articles of Incorporation:		Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor ROCOR WESTERN RITE COMMUNITIES, INC.	<u>'ation:</u>	
,		The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	oration" or "incorporated"	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	5625 GRANADA DR	¥ 267
Principal office address <u>MUST BE A STREET ADDRES</u>	SARASOTA, FLORID	PA 34231
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5625 GRANADA DR SARASOTA , FLORII	
D. If amending the registered agent and/or registered o		nter the name of the
new registered agent and/or the new registered offic	e address:	
Name of New Registered Agent:		
5625 G	5625 GRANADA DR # 267 (Florida street address)	
New Registered Office Address:		
SARAS	SOTA	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am		ne obligations of the position.
	Signature of New Registe	red 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 I V Mike . SV Sally S	<u>Iones</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u>T</u>	PATRICIA KINGHORN	4 RHODES STREET
X Add			PAWTUCKET, RI 02860
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional A (attach additional sheets, if necessary). (Be specific)				
	•			,	
(SEE ATTACHED)					
(SEE ATTACHED)					

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Amended Articles of Incorporation

15 NOV -5 AM 10: 50

For

ORTHODOX ANGLICAN MISSION SOCIETY, INC

N11000002702

The undersigned incorporator, for the purpose of amendment of the existing Articles of Incorporation of the aforementioned Florida not-for-profit corporation, hereby adopts and amends the following articles:

Article I

The name of the corporation is:

ROCOR WESTERN RITE COMMUNITIES, INC.

Article II

The principal place of business address:

5625 GRANADA DR # 267 SARASOTA FL 34231

The mailing address of the corporation is:

5625 GRANADA DR # 267 SARASOTA FL 34231

Article III

The specific purpose for which this corporation is organized is:

TO ESTABLISH AND MAINTAIN PARISHES AND MISSIONS FOR THE ORTHODOX WORSHIP OF THE CONSUBSTANTIAL TRINITY ACCORDING TO THE FAITH, WORSHIP AND DISCIPLINE OF THE WESTERN RITE OF THE HOLY ORTHODOX CHURCH.

Article V

The name and Florida street address of the registered agent is:

REV. FR. MARK ROWE 5625 GRANADA DR # 267, SARASOTA FL 34231

The date of each amendment(s) adoption:		* * * *	10/01/2015	
Signature Content Co	The	e date of each amendment(s) a	doption:	, if other than the
(no more than 90 days after amendment file date) 15 NOV -5 AM 10: 50 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. 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 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) REV. FR. MARK ROWE (Typed or printed name of person signing)	date	te this document was signed.		F 1. 1 = 5
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