

N110000004016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

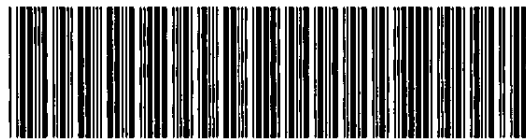
Certified Copies



Certificates of Status

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08/03/12--01030--001 **87.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG - 3 PM 3:13

Amend

AUG 10 2012

T. BROWN

The Law Office of Eric V. Hires, LLC

2739 Taylor Avenue, Orlando, Florida 32806

www.HiresLegal.com

Tax ID: 30-0477795

Eric V. Hires, Attorney at Law

Florida Supreme Court Certified Circuit Civil Mediator

Certified NFLPA Contract Advisor

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Orlando, FL 32856-8943

Telephone: 407.841.1902

Facsimile: 407.841.1906

Toll Free: 866.934.ERIC

August 1, 2012

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Faithworld Center of Orlando, Inc., &
Faithworld Center of Port St. Lucie, Inc.
Articles of Amendment to Articles of Incorporation

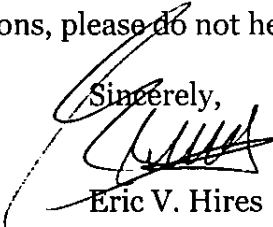
Dear Dept. of State:

Pursuant to Florida Statute §617.0124, attached are the original filing documents of Faithworld Center of Orlando, Inc., and Faithworld Center of Port St. Lucie, Inc., the Cover Letter, the Articles of Correction to Articles of Incorporation of Faithworld Center of Orlando, Inc., and Faithworld Center of Port St. Lucie, Inc.

Also, my firm's check in the amount of \$87.50, the filing fee and Certificate of Status for each entity, is included with this letter.

Should you have any questions, please do not hesitate to contact me.

Sincerely,



Eric V. Hires

EVH/tbm
cc: Faithworld
Enclosures
088480

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Faithworld Center of Port St. Lucie, Inc.

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Eric V. Hires, Esquire

(Name of Contact Person)

The Law Office of Eric V. Hires, LLC

(Firm/ Company)

2739 Taylor Avenue

(Address)

Orlando, FL 32806

(City/ State and Zip Code)

Eric@HiresLegal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eric V. Hires, Esq.

(Name of Contact Person)

at (407) 841-1902

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG -3 PM 3:13

Faithworld Center of Port St. Lucie, Inc.

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

N11000004016

(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:

N/A

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:

N/A

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

N/A

(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: N/A

(Florida street address)

New Registered Office Address:

_____, Florida
(City) (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

(Attach additional sheets, if necessary)

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.

Example:

Type of Action
(Check One)

Title

Name

Address

Page 2 of 4

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

The date of each amendment(s) adoption: August 1, 2012

Effective date if applicable: August 1, 2012

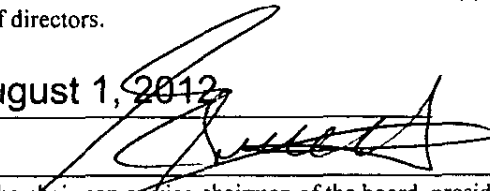
(no more than 90 days after amendment file date)

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 August 1, 2012

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)

Eric V. Hires, Esquire

(Typed or printed name of person signing)

RA/Incorporator

(Title of person signing)