## N110000 11572

(Re	questor's Name)	
(Add	dress)	
- (AdA)	dress)	
(Cit	y/State/Zip/Phone	e #)
	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Fue	Commity Church, Inc.
DOCUMENT NUMBER:	J
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are sub	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
Michael Harrel	
	(Name of Contact Person)
	(Firm/ Company)
7255 116 11 . 0	0 II
7355 US Huy 9	(Address)
	(100.00)
Lakeland, FL 338	309
,	(City/ State and Zip Code)
office @ fuel. chur E-mail address: (to be used	ch
E-mail address: (to be used	d for future annual report notification)
For further information concerning this matter, please	
Donna Veal	at 863 - 859 - 6444  (Area Code) (Daytime Telephone Number)
(Name of Contact Persor	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:
П 625 БШ — р — По42 26 БШ — р — о	□\$43.75 Filing Fee & □\$52.50 Filing Fee
Certificate of Status	Certified Copy Certificate of Status
Certificate of Status	(Additional copy is Certified Copy
	enclosed) (Additional Copy is
	Enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Boy 6327	Division of Corporations Clifton Building
1" L.J. (3.5.1.2.)	

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment**

to

## Articles of Incorporation of

Fuel Community	Church, Inc.
(Name of Corporation	as currently filed with the Florida Dept. of State)
N11000011572	
	nent Number of Corporation (if known)
Pursuant to the provisions of section 617 1006 Flor	ida Statutes, this Florida Not For Profit Corporation adopts the following
amendment(s) to its Articles of Incorporation:	ida statutes. tilis i tortaa tvor i or i voja corporation adopts the toffowing
A. If amending name, enter the new name of the	corporation:
A. If amending name, enter the new name of the	torporation.
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 applical	bla
(Principal office address MUST BE A STREET A	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE E	<u>30X</u> )
	ين ين
	tered office address in Florida, enter the name of the $\stackrel{\sim}{\sim}$
new registered agent and/or the new registere	
Name of New Registered Agent:	Jeremiah Fite = = = =
	7355 US Hwy 98 N. 5
	(Florida stret address)
New Registered Office Address:	
	Lakeland Florida 33809
	(City) (Zip Code)
New Registered Agent's Signature, if changing R	
I hereby accept the appointment as registered agent	t. I am familiar with and accept the obligations of the position.
	1-0-7
_	Signature of New Registered Agent. if changing
	John Megistered 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 Y Mike Jo SV Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	_V	Jermiah Fife	7355 US Huy 98N. Lakeland, FL 33809
Remove  2) Change  Add	<u>P</u> _	Michael Harrall	7355 US Huy 98 N. Lakeland, FL 33809
Remove 3 ) Change Add			19 007 72
Remove 4) Change Add			
Remove Change Add			
Remove 6) Change Add			
Remove			

utach additional sheets, if necessary).	(Be specific)				
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The date of each amendment(s) a late this document was signed.	doption:(	October	17,	2019		_, if other than the
Effective date <u>if applicable</u> :	(no more	than 90 days after a	imendment f	ile date)		
Note: If the date inserted in this bl document's effective date on the De	ock does not mee	t the applicable state			te will not b	e listed as the
Adoption of Amendment(s)	( <u>CHEC</u>	( ONE)				
☐ The amendment(s) was/were a was/were sufficient for approv		embers and the numbers	ber of votes	ast for the amendme	ent(s)	
There are no members or men adopted by the board of direc		ote on the amendme	ent(s). The a	mendment(s) was/w	ere	
Dated OCT	17, 20	19				
have not b	een selected, by a	n incorporator – if i	n the hands	other officer-if director of a receiver, trustee.		_
other cour	MICHAEL	ary by that fiduciary				
		Typed or printed na		signing)		
	Presi	DENT (Title of	person signi	ng)	2 <u>2</u> — ::	. ∓ 130 CT 2
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