N12000006324

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25 SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION		STAL HOLINESS CHU	JRCH, INC.			
DOCUMENT NUMBER:	N12000006324					
The enclosed Articles of An	nendment and fee are sub	omitted for filing.				
Please return all correspond	ence concerning this mat	ter to the following:				
ISAAC P. PRATHER						
		(Name of Contact Per	son)			
	·	(Firm/ Company)				
3812 TRAM RD.						
	-	(Address)				
MONTICELLO, FL 32344						
<u> </u>	-	(City/ State and Zip C	ode)		SEC	2024
pastorisaacprather@gmail.c	com				ALL ALL	2024 AUS
	-mail address: (to be use	d for future annual repo	ort notification	1)	主	-2
For further information cond	cerning this matter, please	e call:			ASSI	79
ISAAC P PRATHER		at	850	508-3698	ECREWARY OF STA	ζ:
	(Name of Contact Person		(Area Code)	(Daytime Telephor	ne Number)	28
Enclosed is a check for the	following amount made p	ayable to the Florida D	epartment of S	State:		
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)		

Mailing Address

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroc Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

CODY PENTECOSTAL HOLINESS CHURCH, INC.

Name of Corporation as currently filed with the Flor N12000006324			
	Vienda a f Companyion	(if leaves)	
(Document i	Number of Corporation	(II KIIOWII)	
ursuant to the provisions of section 617,1006, Florida Smendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida N</i>	ot For Profit Corporation adop	ts the following
. If amending name, enter the new name of the cor	poration:		
			The new
ame must be distinguishable and contain the word "col Company" or "Co." may not be used in the name.	rporation" or "incorpo	orated" or the abbreviation "Co	
. Enter new principal office address, if applicable:			
Principal office address <u>MUST BE A STREET ADDR</u>	RESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
			45
		·	——SE(
. If amending the registered agent and/or registere	d office address in Flo	orida, enter the name of the	ETARY OF
new registered agent and/or the new registered of			- \$3 }3 }3
Name of New Registered Agent:			<u> </u>
			EST S
		(Florida street address)	``
New Registered Office Address:			Lul
		, Florida	
	(City)	(Zip Coa	le)
ew Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. It	tered Agent: am familiar with and a	ecept the obligations of the posi	ition.
		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	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add X Remove	<u>T</u>	JODY CONNELL	56 CONNELL LANE MONTICELLO, FL 32344
2) Change Add	•	DEBBIE CONNELL	4126 WW KELLEY RD. TALLAHASSEE, FL 32311
Remove 3) Change X Add Remove	<u>s</u>	JESSICA PRATHER	3812 TRAM RD. MONTICELLO, FL 323447
4) Change Add	工	Magaline Mosley	2833 Natural Bridge Rd J
Remove 5) Change Add			FATE 8
Remove 6) Change Add			
E. If amending or adding (attach additional sheet)		cles, enter change(s) here: (Be specific)	
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	PILLAHASSEE, FL
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	28 711
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The date of each amendment(s) adoption:	, it other than the
Effective date if applicable: (no more than 90 days after amendment file	date)
Note: If the date inserted in this block does not meet the applicable statutory filing recognition document's effective date on the Department of State's records.	quirements, this date will not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

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SECRETARY OF STATE