## N1200006717

(Requestor's Name)	
(Address)	<u></u> _
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	
Special Instructions to Filing Officer:	

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 26, 2017

RICKY D. MILLER RIVER ROCK MINISTRIES, INC 537 MAPLEWOOD PLACE FORT WHITE, FL 32038

SUBJECT: RIVER ROCK MINISTRIES, INC.

Ref. Number: N12000006717

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

PLEASE PLACE THE CHANGES OF ADDRESSES ON PAGE 2 OF 4 OF THE AMENDMENT FORM. YOU MAY LEAVE PAGE 3 OF 4 BLANK.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

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Letter Number: 017A00019509

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: RIVET ROCK	Ministries, Inc
DOCUMENT NUMBER: N12 00006	717
The enclosed Articles of Amendment and fee are submitted for f	iling.
Please return all correspondence concerning this matter to the fol	_
Trease retain an correspondence concerning and matter to the ton	lowing.
Ricky D. Miller	
(Name of	Contact Person)
River Rock Church	Inc
(Pirm	(Company)
537 Maplewood Pl.	
FL (A	ddress)
Fort White, Sam (City/State	38
Stern (City/ State	e and Zip Code)
rick and julia a C Fa	ith.com,
	annual report normeation)
For further information concerning this matter, please call:	
Rick Miller	at 813 508-3107
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the	Florida Department of State:
S43.75 Filing Fee & S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified (Addition enclosed)	Certificate of Status nal copy is Certified Copy
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
* CONTRACTOR * L. C.	2007 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment

to
Articles of Incorporation of

- 0	of			
RIVERKOK MINIST	ries, In	Ç.		
(Name of Corporation as c	urrently filed with the	Florida Dept, of State)	-	_
N12000006717				
	Number of Corporation	ı (if known)		-
Pursuant to the provisions of section 617.1006, Florida samendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida N</i>	ot For Profit Corporation adopt	s the followin	ıg
A. If amending name, enter the new name of the cor	poration:			
RIVER Rock Chi	urch. I	-nc.	. The nev	N,
name must be distinguishable and contain the word "co	rporation" or incorp	orated" or the abbreviation "Co.	rp." or "Inc."	0
"Company" or "Co." may not be used in the name.  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR		Maplewood Lubita FLKIM	PL	- >0
		Sten	<u> </u>	- > &
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	537 Fort V	Maplewood Unite, FL 3.	PL 2038	<b>-</b> -
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		rida, enter the name of the	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- 17 OCT
Name of New Registered Agent:			1 1 1	<u> </u>
New Registered Office Address:		(Florida street address)	- 15-16 	子子で
	(7)	, Florida	<u></u>	50
	(City)	(Zip Code	)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. It	tered Agent: am familiar with and a	ecept the obligations of the positi	on.	
<del></del>	Signature of New I	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.

				,
<u>PT</u> <u>Joi</u>				/
$\frac{\mathbf{V}}{\mathbf{S}\mathbf{V}} = \frac{\mathbf{M}\mathbf{i}}{\mathbf{S}}$	ke Jones			<i>,</i>
<u>5v 5a</u>	Ily Smith			
Title	Name		Address	
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		Page 2 of 4		
	$\underline{V}$ $\underline{Mi}$			Title Name Address

f amending or adding additional Art attach additional sheets, if necessary).	(Be specific)				
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The date of each amendmen(c) adoption: _	9/21/2017	, if other than the
late this document was signed.  Effective date i <u>f applicable</u> :	9/21/2017	
·—	mo, e than 20 days after amendment fite date)	
Note: If the date inserted in this block does no locument's effective date on the Department	of proof the applicable statutory filing requirement f State's records.	nts, this date will not be listed as the
Adoption of Amendment(s) $(\underline{C}$	HECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for th	ne amendment(s)
There are no members or members ontitle adopted by the board of directors.	ed to vote on the amendment(s). The amendmen	n(s) was/were
Dated $9/21$	12017	
Signature Julia	K Miller	
have not been selected	ce chairman of the board, president or other offi I, by an incorporator – if in the hands of a receive fiduciary by that fiduciary)	
- Julir	(Typed or printed name of person signing)	
Vice	President	
	(Title of person signing)	