N12000010339

(Re	equestor's Name)	
(Ad	ldress)	 -
(Ad	Idress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200275444262

08/10/15--01014--003 **35.00

STATE TARY TO STATE OF THE STAT

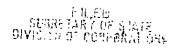
AUG 1 1 2015 C LEWIS

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Christian	n Home Educators Association of
DOCUMENT NUMBER: N12000	10339
The enclosed Articles of Amendment and fee are subr	mitted for filing.
Please return all correspondence concerning this matte	er to the following:
Sheri Duraway	(Name of Contact Person)
. 3	(Name of Contact Person)
	(Firm/ Company)
	(Time Company)
13707 SE 171 Lane	
	(Address)
Hawthorne FL 3264	40
•	(City/ State and Zip Code)
relay 4 Cancer a gmall E-mail address: No be used	. COW
For further information concerning this matter, please	
Sheri Dunaway	at 353 - 301 - 0342 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pa	syable to the Florida Department of State:
■\$35 Filing Fee ■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status (Additional Copy is Enclosed)
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



15 AUG 10 AM 8:55

Christian Home Educators Association of Ocala, Enc.
(Name of Corporation as currently filed with the Florida Dept. of State)
<u>N1200010339</u>
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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: Sveri Duraway
(Principal office address MUST BE A STREET ADDRESS) 13707 SE 171 Lane
Howthorne FL 32640
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
D. <u>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:</u>
Name of New Registered Agent: Sheri Diwaway
13707 SE 171 Lane, Hawthorne, FL 30640
New Registered Office Address:
Hawthorne, Florida 33640 (City) (Zip Code)
(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.
Thereby accept the appointment as registered agent. I am jamular with and accept the obligations of the position.
Wo he hundreday
Simplying of Naw Paristaned Agent & Aspering

Page 1 of 4

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	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
Change Add Remove	VP	Laura La Tulipe	PO BOX 4715 Ocala, FL 34478
2) X Change Add	<u>Presid</u> ent	Tami Chapman	POBOX 4715 Ocala, FL 34478
Remove 3) Change Add	Activities Coordinate	r Becky Gilmore	PO BOX 4715 Ocala, FL 34478
Remove 4) Change Add	Membershi <u>Liaso</u> n	Teri Guertler	Po Box 4715 Ocala, FL 3447
Remove 5) Change Add	Legislative Alert Luason	Stephanie Price	Po Box 4715 Ocala, FL 34478
Remove 6) Change Add Remove			

	,,, (,	ter change(s) here ecific)		
NIA				
		<u> </u>	 	
		•		
			 	· · · · · · · · · · · · · · · · · · ·
			 	
	 		 	
				
			 ····	

The date of each amendment(s) adoption: July 1, 2015 if other than the	!
date this document was signed. $g_{V_{S}} = g_{S} = g_{S} = g_{S}$	
Effective date if applicable: July 1, 2015	;
(no more than 90 days after amendment file date)	J. Y .
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 55 document's effective date on the Department of State's records.	5
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 <u> </u>	
Signature Mulliman	
(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)	
Sheri Dunaway (Typed or printed name of person signing)	
Treasurer (Title of person signing)	