## N13962

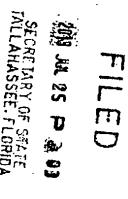
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600331997166

07/25/19--01009--023 \*\*35.00



## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:EMMANUE	L BAPTIST CHURCH OF LONWOOD FLORIDA INC
DOCUMENT NUMBER: N13962	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this re	natter to the following:
Robert F. Hoogland	
	(Name of Contact Person)
Robert F. Hoogland, P.	A.
	(Firm/ Company)
P.O. Box 160021	
	(Address)
Altamonte Springs, FL	32716-0021
	(City/ State and Zip Code)
RFH@RFHPA.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	rase call:
Robert F. Hoogland	at 407-862-4909
(Name of Contact Per	
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:
x□ \$35 Filing Fee □ \$43.75 Filing Fee Certificate of State	tus Certified Copy Certificate of Status (Additional copy is enclosed) Certificate Opy (Additional Copy is Enclosed)
Mailing Address	Street Address

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

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment

to

## Articles of Incorporation of

FILED

EMMANUEL BAPTIST CHURCH	OF LONGWOOD FL	ORIDA INC.	
(Name of Corporation	as currently filed with the l	lorida Dept. of State)	à 33
ท13962		AND COL 25 In 1	<b>.</b> • 3
(Docum	nent Number of Corporation (	tkno <b>SE</b> CRETARY OF ST TALLAHASSEE, FLO	FATE DRIDA
Pursuant to the provisions of section 617,1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes, this <i>Florida Not</i>	For Profit Corporation ado	pts the following
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the word		ated" or the abbreviation "C	Sorp." or "Inc."
"Company" or "Co." may not be used in the name	<u>'.</u>		
B. Enter new principal office address, if applical	ble:		
(Principal office address <u>MUST BE A STREET A</u>			
	<del></del>		
C. Pakarana Wasa dida sa Maraki da			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<b>30</b> X)		
			<del></del>
D. If amending the registered agent and/or registered agent and/or the new registered.		da, enter the name of the	
new registered agent and/or the new registers	tu onice address.		
Name of New Registered Agent:	Christopher C.	Conner	<del></del>
	244 Longwood F	Iills Road	
Mark to Logical III		(Florida street address)	
<u>New Registered Office Address:</u>	- 3		
	Longwood	, Florida	32750
	(City)	(Zip Co	dg:)
New Registered Agent's Signature, if changing R	legistered Agent:		
I hereby accept the appointment as registered agent		ept the obligations of the pos	sition,
			-
	Signature of New Re	fistered 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:

 $P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C \neq Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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	<u>PT John I</u> <u>V Mike . SV Sally 5</u>	<u>lones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Deacon	Mark Hallberg	244 Longwood Hills
Add			Rd. Longwood FL
x_ Remove			32750
2) Change	Senior Pastor	Joshua D. Smith	244 Longwood Hills
Add			Rd. Longwood, FL
x Remove	Pastor		32750
3) Change	Emeritús ———	is Walter Hallberg	244 Longwood Hills
Add			Rd. Longwood FL
x_ Remove			32750
4) Change X_ Add	DPST	Christopher C. Conner	244 Longwood Hills
Remove			32750
5) Change	DVP	Carol A. Hallberg	244 Longwood Hills
x_ Add			Rd. Longwood, FL
Remove			32750
6) Change			
Add			
Remove			

If amending or adding additional Artication (attach additional sheets, if necessary).	(Be specific)
	·
<del></del>	
· · · · · · · · · · · · · · · · · · ·	

•	, if other than the
date this document was signed.	
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 requirements, this date will not be document's effective date on the Department of State's records.	listed as the
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 7/11/19	
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 bands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing) Christopher C. Conner	
President (Title of person signing)	