N14000003104

(Requestor's N	ame)
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COVER LETTER

TO: Amendment Section
Division of Corporations

Nightlight Christian Adoptions, Inc.

NAME OF CORPORATION:

N14(00003104

DOCUMENT NUMBER:

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elizabeth Pinel

(Name of Contact Person)

Nightlight Christian Adoptions, Inc.

950 Lee Road, Suite 219	(Firm/ Company)	
√inter Park, Florida 32789	(Address)	

(City/ State and Zip Code)

E-mail address: (to be used for future annual report notification)

(Name of Contact Person)

For further information concerning this matter, please call:

liz@nightlight.org

Elizabeth Pinel 407 628-9051

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 F

Certificate of Status Certified Copy (Additional copy is

enclosed)

■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

(Daytime Telephone Number)

Mailing Address

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

(Area Code)

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Nightlight Christian Adoptions. Inc.

(Name of Corporation as currently filed with the Flo	orida Dept. of State)
N14000003104	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	rporation:
name must be distinguishable and contain the word "co <u>"Company" or "Co." may not be used in the name</u> .	orporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	1950 Lee Road
(Principal office address MUST BE A STREET ADDI	
	Winter Park, Florida 32789
C. Enter new mailing address, & applicable: (Mailing address MAY BE A POST OFFICE BOX	1950 Lee Road (7)
	Suite 219
	Winter Park, Florida 32789
D. If amending the registered agent and/or registere	
new registered agent and/or the new registered o	office address: zabeth Pinel
Name of New Registered Agent:	zabeth Phet
195	50 Lee Road, Suite 219
New Registered Office Address:	(Florida street address)
	nter Park 32789
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept the obligations of the position.
	Signature of New Registered Agent, if changing
	Signature of New Registered Agent, if changing

and address of each Of (Attach additional sheet: Please note the officer/d P = President; V= Vice	ficer and s, if necess irector tit President = Chief F	/or Director being added: sary) le by the first letter of the office title: ; T= Treasurer; S= Secretary; D= Direct inancial Officer. If an officer/director ho	each officer/director being removed and title, name, tor; TR= Trustee; C = Chairman or Clerk; CEO = Chief olds more than one title, list the first letter of each office
Changes should be noted a change, Mike Jones led Mike Jones, V as Remov	aves the c	prporation, Sally Smith is named the V ar	isted as the PST and Mike Jones is listed as the V. There is ad S. These should be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	I service Disser	Elizabeth Pinel	Winter Park, Florida 32789
2) Change Add	f secular a Direct	Megan White	310 S Dillard Street, Suite 170 Winter Garden, Florida 34787
X Remove 3) Change Add Remove			
4) Change Add	-		
Remove 5) Change Add			
Remove 6) Change Add			
Remove			
E. If amending or addi (attach additional she	ng additioners, if neco	onal Articles, enter change(s) here: essary). (Be specific)	

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The date of each amendment(s) a	02/22/2022 doption:	if other than the
date this document was signed.		ii omei man me
Effective date <u>if applicable</u> :	2/2022	
Encerve date <u>ir applicable</u> .	(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this bl document's effective date on the D	ock does not meet the applicable statutory filing requirements, this date will not be partment of State's records.	listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a was/were sufficient for approx	dopted by the members and the number of votes east for the amendment(s)	

	09/19/20 2 2 Sept [19, 2022
Dated _	
Simpotor-	David Welshay
_ Signature _ (B	By the chairman or vice chairman of the board, president or other officer-if directors
h	have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Daniel Nehrbass Daniel Nehrbass
	(Typed or printed name of person signing)
	President
	President
	(Title of person signing)