## 114000007740

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phor	ne #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Na	me)		
(Do	cument Number	)		
Certified Copies	_ Certificate	s of Status		
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JAN 0 6 2015

C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: LOVE and Forgive Church INC N14000007740 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Bryon Johnson
(Name of Contact Person) Forgive NO 1204 0 th love and forgive church Qyahoo, com
E-mail address: (to be used for luture annual report notification) For further information concerning this matter, please call: Bryon Johnson
(Name of Contact Person) at ( 239 ) 265 - 869 2 (Area Code & Daytime Telephone Number) 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 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment to

Articles of Incorporation

Love AND Forcing (	hurch TNC	
(Name of Corporation as currently	filed with the Florida Dept. of State)	
N14000007740		코유 근
(Docum	nent Number of Corporation (if known)	
amendment(s) to its Articles of Incorporation		dopts the following
A. If amending name, enter the new nam	e of the corporation:	
name must be distinguishable and contain the "Company" or "Co." may not be used in the	he word "corporation" or "incorporated" or the abbreviation he name.	"Corp or "Inst
B. Enter new principal office address, if a (Principal office address MUST BE A STR	applicable: 1204 Ne 10th St REET ADDRESS) Cape Coral FL 330	109
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF	ible: FFICE BOX)	
D. If amending the registered agent and/onew registered agent and/or the new remarks of New Registered Agent:	or registered office address in Florida, enter the name of the registered of fice address:	
<u>New Registered Office Address</u> :	(Florida street address)	
_	Florida	
	(City)	Zip Code)
	ed agent. I am familiar with and accept the obligations of the p	position.
	Signature of New 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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address 1204 Ne 10th St
1) Change	$\mathcal{D}$	TREY DANIELS	2328 SW 19th Ave
Add			CAPE CORAL, FL 33991
Remove		_	1204 No 10th St
2) Change	<u>C</u>	Deidre Johnson	2328 SW 19th Ave
Add			cape Coral, FL 33909
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>11</u>	amending or a	adding addition of sheets, if necessity	onal Article essary). (	es, enter chans Be specific)	ze(s) here:				
	We	are	remov.	ing a	Off	icers	Direc	40 C	
	Trey	Danie	15	and	Cler	K Dei	gre	Sohns	<u>M.</u>
	The	addres		125 0	<u>ilso</u>	Change	29 to	OM	
	2328	SW	19+4	Ave	10	1204	Ne	104N	St
	The	new	Zip	coge	<u>is</u> 3	3909.			
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date this document was signed.	If other than the
Effective date if applicable: 12/18/14	
(no more than 90 days after amendment file date)	
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.	
Signature 6	
(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)	
other court appointed fiduciary by that fiduciary)	
Bryon Johnson	
(Typed or printed name of person signing)	
President Pastor	
(Title of person signing)	