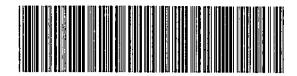
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(Requestor's I	Name)
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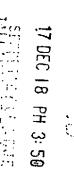


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TO: Amendment Section Division of Corporations

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NAME OF CORPORATION	OF CORPORATION: THE CHURCH IN FT. MYERS, INC			
DOCUMENT NUMBER:	N14000007779			
The enclosed Articles of Amer	adment and fee are submitted for filing.			
Please return all correspondenc	ce concerning this matter to the following:			
	JORGE ROCA			
	(Name of Contact Person)			
	THE CHURCH IN FT. MYERS, INC			
	(Firm/ Company)			
<u> </u>	3315 25TH SW			
	(Address)			
	LEHIGH ACRES, FL 33976			
	(City/ State and Zip Code)			
·	akcossio@msn.com			
E-m	nail address: (to be used for future annual report notification)			
For further information concern	ning this matter, please call:			
	JORGE ROCA at (407) 462-1388			
(N	fame of Contact Person) (Area Code) (Daytime Telephone Number)			
Enclosed is a check for the foll	owing amount made payable to the Florida Department of State:			
□ \$35 Filing Fee [\$43.75 Filing Fee & \$\sum \\$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)			

Mailing Address

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

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

Articles of Amendment

Articles of Incorporation DEC 18 PH 3: 50 of COUNTY WAY SEED

THE CHURCH IN	STOVE MATERIAL STOP A STORY	
	ly filed with the Florida Dept. of State)	
N14000007 (Document Numbe	779 or of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following	
A. If amending name, enter the new name of the corporation	on:	
N/A	The new	
name must be distinguishable and contain the word "corporati "Company" or "Co." may not be used in the name.	on" or "incorporated" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable:	3315 25TH ST SW	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	LEHIGH ACRES, FL 33976	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3315 25TH ST SW	
	LEHIGH ACRES, FL 33976	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	e address in Florida, enter the name of the ldress:	
Name of New Registered Agent:	N/A	
New Registered Office Address:	(Florida street address)	
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	Agent: illiar with and accept the obligations of the position.	
	N/A	
Sig	nature 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	<u>V</u> <u>1</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	_D	AARON WHITE	1121 HIGHLAND AVE
Add			LEHIGH ACRES
X Remove			FL 333971
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			<u> </u>

If amending or adding add attach additional sheets, if r	necessary). (B	e specific)				
		N/A				
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The date of each amendment(s) adoptio date this document was signed.	n:12/14/2017	, if other than th
Effective date <u>if applicable</u> :	12/14/2017	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Department.	es not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for t	the amendment(s)
☐ There are no members or members er adopted by the board of directors.	ntitled to vote on the amendment(s). The amendme	ent(s) was/were
Dated Decemb	Dra 14-2017	
Signature Jory	Doca_	
have not been sele	or vice chairman of the board, president or other offected, by an incorporator – if in the hands of a recented fiduciary by that fiduciary)	
	JORGE ROCA	
	(Typed or printed name of person signing	2)
	STD	
	(Title of person signing)	<u>-</u>