N14000009675

(Re	questor's Name)	
(Ad	idress)	-
	dress)	
(Au	uiess)	
(Cit	:y/State/Zip/Phone #	9
PICK-UP	☐ WAIT	MAIL
(D.:	ainea Estiva Nama	
(80	siness Entity Name)
(Do	cument Number)	
Certified Copies	Certificates o	f Status
	_	
Special Instructions to	Filing Officer:	

Office Use Only

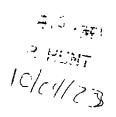


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COVER LETTER

TO: Amendment Section Division of Corporations	44
NAME OF CORPORATION: TURNING POINT CHURCH OF BONITA, INC.	-
DOCUMENT NUMBER: N1400009675	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
STEVEN KNIGHT (Name of Contact Person)	
(Name of Contact Person)	
TURNING POINT CHURCH OF BONITA, INC.	
(Firm/ Company)	
3405 PELICAN LANDING PARKWAY (Address)	
	707
BONITA SPRINGS, FL 34134 (City/State and Zip Code)	200
(City/ State and Zip Code)	1
Steven knight a toclive, org E-mail address (to be used fortuure annual report politication)	
For further information concerning this matter, please call:	04:21 4 4 FM 5:40
STEVEN KNIGHT at (S17)-771-1542 (Name of Contact Person) (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the Florida Department of State:	

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

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Enclosed)

Articles of Amendment

to
Articles of Incorporation
of

_ TURNING POINT CHUSCH O		
(Name of Corporation as currently filed with the Florida I	Dept. of State)	•
N14000009675		_
(Document Numb	per of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	cs, this Florida Not For Profit Corporation adopts the following	g
A. If amending name, enter the new name of the corporat	tion:	
NA	The nev	ų,
name must be distinguishable and contain the word "corpora "Company" or "Co," may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	, NA	-
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	2023 OCT - 4	DIVISION OF CORPORAL
	ice address in Florida, enter the name of the	- 원 - 왕조
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	ce address in Florida, enter the name of the address:	7.
Name of New Registered Agent: 5 T1	EVEN KNIGHT	_
340	05 PELICAN LANDING PARKW (Floridu street address)	<u>L</u> AY
New Registered Office Address:		
<u>1501</u>	VITA SPRINIGS, Florida 34134 (City) (Zip Code)	-
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai		
Si	ignature 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	PT John D V Mike J SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change X Add	<u>P</u>	STEVEN KNIGHT	1233 Imperial DR. NARLES FL 34110
Remove 2) X Change Add		BICHARD PAULHAMUS	9040 PALMAS GR. BLVD 102. BONITA SPES FL 34135
Remove 3) Remove Add Remove	_5_	STEVE GILL	27411 TORTOISE TRAIL BODITA SPES FL 34135
4) Change Add			
Remove 5) Change Add Remove 6) Change			2023 OC
Add Remove		ticles, enter change(s) here: (Be specific)	TARY OF STATE TO
<i>NA</i>			

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The date of each amendment(s) adoption date this document was signed.	n:	_, if other	than the
Effective date if applicable:			
	(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 requirements, this date will not bent of State's records.	oc listed a	s the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)		

(Title of person signing)