## N14942

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## **COVER LETTER**

TO: Amendment Section Division of Corporations	¥ .	^		
NAME OF CORPORATION:	_	e Church of Spring		
DOCUMENT NUMBER:				
The enclosed Articles of Amendmen				
Please return all correspondence cor		_		
Frank Cassarà, Treasurer				
	- (	(Name of Contact P	erson)	
Faith Evangelical Free Church of S	pring Hill Inc	•		
		(Firm/ Compan	у)	
5338 Freeport Drive				
-		(Address)	<del></del>	
Spring Hill, Florida 34606				
- "	(	City/ State and Zip	Code)	
feassara@tampabay.rr.com				
E-mail ac	ldress: (to be used	for future annual re	port notificatio	n)
For further information concerning t	his matter, please c	call:		
Frank Cassarà		at	(352)	573-0016
(Name	of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following	g amount made pay	able to the Florida	Department of	State;
	3.75 Filing Fee & <b>[</b> tificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy) enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327

Street Address
Amendment Section Division of Corporations Clifton Building

## Articles of Amendment to Articles of Incorporation of

(I tank of Corporation as curre	<u>ntly filed with the F</u>	lorida Dept. of State)	
N14942		_	
(Document Num	ber of Corporation (i	f known)	
Pursuant to the provisions of section 617,1006, Florida Statumendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not</i>	For Profit Corporation adopts the	following
A. If amending name, enter the new name of the corpora	tion:		
Gateway Bible Church Inc			The new
ame must be distinguishable and contain the word "corpor	ution" or "incorpora	tted" or the abbreviation "Corp."	or "Inc."
Company" or "Co," may not be used in the name.			
3. Enter new principal office address, if applicable:		<u>-</u>	<del></del> ·
Principal office address <u>MUST BE A STREET ADDRESS</u>	( )		
		<del></del> .	
Enter new mailing address, if applicable:		<i>∵</i> ₩	2019
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )			2
		Α. 	
). If amending the registered agent and/or registered off	ica addrass in Floria	(i).	=
new registered agent and/or the new registered office		-ra:	
Name of New Registered Agent:		i -	່., ພັ
		(Florida street address)	
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code)	

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	PT         John Do           Y         Mike Jo           SV         Sally St	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove			
2) Change Add Remove			
3 ) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			

f amending or adding additional Arti utach additional sheets, if necessary).	(Be specific)					
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			_			

		August 12, 2019	
	ate of each amendment its document was signed	t(s) adoption:	_, if other than the
Effect	ive date <u>if applicable</u> :	August 12,2019	
		(no more than 90 days after amendment file date)	
		nis block does not meet the applicable statutory filing requirements, this date will not be be be because of State's records.	oe listed as the
Adopt	tion of Amendment(s)	( <u>CHECK ONE</u> )	
	The amendment(s) was/w ras/were sufficient for ap	rere adopted by the members and the number of votes cast for the amendment(s) oproval.	
	There are no members or adopted by the board of a	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Dated Augu	st 12, 2019	
	Signature	Maru Carsara	
	have n	Cahairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	_
	Fra	mk P Cassarà	
	•	(Typed or printed name of person signing)	
	Tre	easurer	
		(Title of person signing)	