N1500004167

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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SEP 3 0 2015

C. CARROTHISRS

C. CARROTHERS

TO: Amendment Section Division of Corporations

The Genesis Churc	ch of Vero Beach, Inc.
N15000004167	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this mat	tter to the following:
Derrick West	
	(Name of Contact Person)
Genesis Church	
	(Firm/ Company)
570 Fox Run SW	
	(Address)
Vero Beach, FL 32962	
	(City/ State and Zip Code)
clempson81@gmail.com	
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, pleas	se call:
Mandy Fetzer	772 473-9337
(Name of Contact Perso	
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
\$35 Filing Fee \$35 Certificate of Status	\$\$\square\$\squar
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 to Articles of Incorporation of

The Genesis Church of Vero Beach, Inc.			700
(Name of Corporation as cur	rently filed with the Fl	orida Dept. of State)	-0 0
N15000004167			
(Document Nu	ımber of Corporation (it	known)	28 - 28
Pursuant to the provisions of section 617.1006, Florida Sta	tutos this Elspida Not	For Profit Corneration adopts t	he following
amendment(s) to its Articles of Incorporation:	uutes, uns <i>Prortua 1401 l</i>	ron Proju Corporation adopts t	STAT
A. If amending name, enter the new name of the corpo	ration:		5 MG
n/a			The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name	oration" or "incorpora	ted" or the abbreviation "Corp.	" or "Inc."
B. Enter new principal office address, if applicable:	n/a		
(Principal office address MUST BE A STREET ADDRE	<u>SS</u>)	<u> </u>	
•			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a		
D. If amending the registered agent and/or registered	office address in Floric	la. enter the name of the	
new registered agent and/or the new registered office		.,,	
Name of New Registered Agent: n/a			
		(Florida street address)	
New Registered Office Address:		(Fiorital street add Ess)	
		. Florida	
	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an		ept the obligations of the position	n.
	Signature of New Reg	ristered 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	V Mik	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	T	Lora Grabach	5182 Formosa Circle
Add			Vero Beach, FL 32967
x Remove			
2) Change	T	Robert Lindsey	6585 12th St.
x Add			Vero Beach, FL 32966
Remove	D	Robert Lindsey	6585 12th St.
3) Change		Robert Emusey	Vero Beach, FL 32966
Add Remove			
4) Change			_
Add			
5) Change			
Add Remove			
6)Change			<u> </u>
Add		,	
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
n/a	
	

		9/21/15	
	e date of each amendment this document was signed	t(s) adoption:	, if other than the
	ective date <u>if applicable</u> :	9/21/15	
		(no more than 90 days after amendment file date)	
		his block does not meet the applicable statutory filing requirements, this date with the Department of State's records.	ll not be listed as the
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s pproval.)
	There are no members of adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Dated	9/21/15	
	Signature		
	have	e chairman 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)	
		D. Derroll West (Typed or printed name of person signing)	
		(1 yped or printed name of person signing)	
	<u></u>	President	
		(Title of person signing)	