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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	n: Reden	aption u	vorship	center, Ir	<u>1</u>
DOCUMENT NUMBER: _	N15000	04628	···		
The enclosed Articles of Ame	endment and fee are subm	nitted for filing.			
Please return all corresponder	nce concerning this matte	r to the following:			
GIORIA L	. MCCal	/ (Name of Contact Pers	on)		
Redemption	Church o	Firm/ Company)	iont, t	nC	
1203 W	Hwy 50	Suite (Address)	A		
Clermont	FL 34	711			
glormeca	G Mail address: (to be used	.com			
For further information concer		•	,		
Abria Liy	<u>Call</u>			80-0594	
Enclosed is a check for the fol	Name of Contact Person) lowing amount made pay	· ·		ytime Telephone Number)	
☐ \$35 Filing Fee	\$43.75 Filing Fee & Control Certificate of Status	\$\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Fili Certificate Certified C (Additional Enclosed)	of Status opy	

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

REDEMPTION WORSHIP CENTER, INC

(Name of Corporation as current)	y filed with the Florida Dept. of St	tate)
N150	00004428	
(Document Number	r of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statutes amendment(s) to its Articles of Incorporation:	, this <i>Florida Not For Profit Corpor</i>	ration adopts the following
A. If amending name, enter the new name of the corporation		
Redemption Church of Germannerment to the companion of the companion of the companion of the control of the control of the companion of the control of the c	ont, INC.	The new
name must be distinguishable and contain the word "corporatio" "Company" or "Co." may not be used in the name.	on" or "incorporated" or the abbrev	viation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		-
Principal office address MUST BE A STREET ADDRESS)	NIA	
_		
-		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
	NA	0
-		<u> </u>
		<u>`</u> o`
). If amending the registered agent and/or registered office		e of the
new registered agent and/or the new registered office ad-	dress:	
Name of New Registered Agent:	NA	
New Registered Office Address:	(Florida street addres.	Ŋ
	NA	
• -	(City)	Florida
Van Danistanud Agant's Cignatura if abanging Danistanud A		•
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam.		of the position.
	.1	
<u></u>	NIA	
Sig	nature of New Registered Agent, if c	hanging

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
(**************************************	y	,		
				
				· · · · · · · · · · · · · · · · · · ·
		·		
	.			
•		•		

The date of each amendment(s) adoption date this document was signed.	"NA	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date	e)
Note: If the date inserted in this block doc document's effective date on the Departme	es not meet the applicable statutory filing require ent of State's records.	ments, this date will not be listed as 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	r the amendment(s)
There are no members or members en adopted by the board of directors.	titled to vote on the amendment(s). The amendment	nent(s) was/were
Dated	3/16/19	
Signature		Stranger in Human and
have not been sele	vice chair nan of the board, president or other of cted, by an incorporator — if in the hands of a rec ted fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	ıg)
Pro	esident / Director	
·	(Title of person signing)	