## N15000004650

(Requestor's Name)	
(Address)	60
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	S T/115
Special Instructions to Filing Officer:  Spake with My L. Chin - H.C.  Spake with My L. Chin - H	Tan & P =-
<b>S</b>	An M

Office Use Only



0358806106

02/03/21--01034--018 \*\*52.50

\_1



May 11, 2021

W. RONALD MCLLVEEN 3526 SHORELINE CIRCLE PALM HARBOR, FL 34684

SUBJECT: DIGITAL DISCIPLE CORPORATION

Ref. Number: N15000004650

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

PLEASE NOTE THE ATTACHED COPY OF THE ARTICLES OF INCORPORATION FOR THE CORRECT ENTITY NAME. PLEASE RESUBMIT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 921A00009876

Susan Tallent Regulatory Specialist II

www.sunbiz.org



March 30, 2021

W. RONALD MCLLVEEN 3526 SHORELINE CIRCLE PALM HARBOR, FL 34684

SUBJECT: DIGITAL DISCIPLE CORPORATION

Ref. Number: N15000004650

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA NOT FOR PROFIT CORPORATION. Please complete and return the emclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 621A00006631

Rec5/11/21

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Digital Disciple Ne  N:	twork Corporation			
	N15000004650				
DOCUMENT NUMBER: _				<del></del>	
The enclosed Articles of Am	<i>endment</i> and fee are sub	omitted for filing.			
Please return all corresponde	nce concerning this mat	ter to the following:			
W. Ronald McIlveen					
		(Name of Contact Pe	erson)		
		(Firm/ Company	·)		
3526 Shoreline Circle					
		(Address)			
Palm Harbor, FL 34684					
		(City/ State and Zip	Code)	<u> </u>	
ronaldMellveen@gmail.com					
E-	mail address: (to be use	d for future annual rep	ort notification	n)	
For further information conce	erning this matter, please	e call:			
Ronald McIlveen		at	727	492-8646	
(	Name of Contact Person	n)	(Area Code)	(Daytime Telephone Number)	)
Inclosed is a check for the fo	Howing amount made p	ayable to the Florida I	Department of	State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Ac	ldress	Str	eet 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

## Articles of Amendment to Articles of Incorporation of

Digital Disciple Corporation		
(Name of Corporation as currently filed with the Florida I	Dept. of State)	
N15000004650		
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit Co</i>	<i>rporation</i> adopts the following
A. If amending name, enter the new name of the corporati	ion:	
Arrupe Spirituality Digital Center Corporation		
name must be distinguishable and contain the word "corporat	ion" or "incorporated" or the ab	breviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.  B. Enter new principal office address, if applicable:	N/A	2: 2: 2: 2:
(Principal office address MUST BE A STREET ADDRESS)	)	
		c.J
		**
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	<u> </u>
	<del></del> -	
D. If amending the registered agent and/or registered offic	ps address in Florida, enter the t	same of the
new registered agent and/or the new registered office a		Table Of the
Name of New Registered Agent: N/A		
New Registered Office Address:	(Florida street aa	(dress)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:	tono de la constitución
I hereby accept the appointment as registered agent. I am far	ишаг with and оссерсте обидаг.	ions of the position.
		<del></del>
$S_{ij}$	gnature 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           V         Mike Jo           SV         Sally Sr	ones.	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	<u>D</u>	Kellie M. Del.co	11348 Saint Pierre Way Irvine, CA 92630
x Remove			
2) Change Add			
Remove 3 ) Change Add Remove			
4) Change Add			
Remove			
5/ Change Add			
Remove			<u>.                                    </u>
6) Change Add			
Remove			
E. If amending or addin (attach additional sheet N/A		cles, enter change(s) here: (Be specific)	
	**************************************		
	<del>-</del>		

•						
	•					
					#U	
						<del></del>
			<u></u>		·	
	1 # <del></del>	· · · · · · · · · · · · · · · · · · ·		····		
	<u> </u>				<u>.                                      </u>	
				•		
······································		- <del></del>				
						<u> </u>
The date of each amendment(s) adoption: ate this document was signed.				·	if oth	er than th
ffective date if applicable:		days after amen				
(n)  Fote: If the date inserted in this block does ocument's effective date on the Department	not meet the app	olicable statutory			e will not be listed	as the

(CHECK ONE)

■ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

Adoption of Amendment(s)

	5/10/2021
Dated	
	111/6
Signature	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Robert T. Quinn
	(Typed or printed name of person signing)
	VP and Director