## N15000008713

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

2018 DEC 10 PH 3:59

NAME OF CORPORATION	CALVARY CHAPEI	L OF PORT ORANG	E INC	SECRETARY OF STATE TALLAHASSEE FLORID
DOCUMENT NUMBER:	N15000008713			TOOLETT LONIE!
The enclosed Articles of An	nendment and fee are subm	nitted for filing.		
Please return all correspond	ence concerning this matte	r to the following:		
RODNEY S WHITE CPA				
		(Name of Contact Per	son)	
RODNEY S WHITE CPA				1
		(Firm/ Company)	)	
4650 LIPSCOMB ST NE.	SUITE 20			
		(Address)		
PALM BAY, FL 32905				
	<del></del>	(City/ State and Zip C	Code)	
RODWHITECPA@EART	HLINK.NET			
	E-mail address: (to be used	for future annual repo	ort notification	)
For further information con	cerning this matter, please	call:		
RODNEY S WHITE CPA		at	321	652-3406
	(Name of Contact Person			(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	yable to the Florida D	epartment of !	State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee icate of Status ied Copy tional Copy is osed)

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

2011 DEC 10 PH 3: 53

CALVARY CHAPEL OF PORT ORANGE INC (Name of Corporation as currently filed with the Florida Dept. of Sate RETARY OF 3 N15000008713 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006. Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp," or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Page 1 of 4

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	<u>V</u> <u>Mil</u>	n <u>Doe</u> te Jones ty Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	PVST	GALLO, KEITH	PO BOX 290104
Add			PORT ORANGE, FL 32127
X Remove			
2) Change	PVST	BECKMAN, BILL	PO BOX 290104
X Add			PORT ORANGE, FL 32127
Remove			
3) Change			
Add			
Remove			<del></del>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arts (attach additional sheets, if necessary).	(Be specific)		
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	date of each amendment(s) adoption:	, if other than the
date	this document was signed.	
Effe	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fite adie)	
Not doc	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi ument's effective date on the Department of State's records.	ll not be listed as the
Ado	option of Amendment(s) (CHECK ONE)	
0	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s was/were sufficient for approval.	)
8	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated	
	Signature X	
	(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)	
	KEITH GALLO	
	(Typed or printed name of person signing)	
	PVST	
	(Title of person signing)	