## N15000011467

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Living Waters United Church	Inc.
N15000011467 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for	r filing.
Please return all correspondence concerning this matter to the	following:
Deundrick Reed	
(Name o	f Contact Person)
(Fire	m/ Company)
15034 Hill Road	
	(Address)
Dade City, FL 33523	
(City/ St	ate and Zip Code)
lhl3ptmin@aol.com	
E-mail address: (to be used for futur	e annual report notification)
For further information concerning this matter, please call:	
Deundrick Reed	352 206-2707
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to	the Florida Department of State:
	ed Copy Certificate of Status ional copy is Certified Copy

Mailing 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

Living Waters United Church Inc.			
(Name of Corporation as currently filed with the Flor	ida Dept. of State)		
N15000011467			
(Document N	Sumber of Corporation	(if known)	
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	tatutes, this Florida N	ot For Profit Corporation adopt	s the following
A. If amending name, enter the new name of the corp	ooration:		
			The new
name must be distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorpe	rated" or the abbreviation "Cor	p," or "Inc,"
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</u> )		
	-		
		. <u></u>	<u> </u>
C. Enter new mailing address, if applicable:		\$ <sup></sup>	
(Mailing address MAY BE A POST OFFICE BOX)			÷ ω
		Ć	(A) (P)
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		<u></u>	77 10
D. If amending the registered agent and/or registered	l office address in Flo	rida, enter the name of the	一日
new registered agent and/or the new registered off	fice address:		
Name of New Registered Agent:			
		(Florida street address)	
New Registered Office Address:			
		Florida	
	(City)	(Zip Code	)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a		cept the obligations of the positi	on.
	Signature of New R	egistered 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 Doc 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 S	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>T</u>	Taffini Reed	Dade City, FL 33523
xx Remove			
2) Change Add	<u>T</u>	Freddie Mae Reed	Dade City, FL 33523
Remove 3) Change Add Remove		·	
4) Change Add			
Remove			
5) Change Add		<del></del>	
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional sheet	e additional Arti ts, if necessary).	icles, enter change(s) here: (Be specific)	
(a. 5 a. 5	··		

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The date of each amendment(s) adoption date this document was signed.	n:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Departme	es not meet the applicable statutory filing requirements, this date will not be ent of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes east for the amendment(s)	

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
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)  Deundrick Reed
(Typed or printed name of person signing)
President
(Title of person signing)