## N16000002368

(Requestor's Name)
·
(Address)
(Address)
(Addless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Submission Linky Hame)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100291022161

10/19/16--01017--002 \*\*35.0n



OCT 20 2016

TO: Amendment Section Division of Corporations	e Church In:
NAME OF CORPORATION: Vintag	e Church Inc. 's
DOCUMENT NUMBER: VIGOO	
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	tter to the following:
Mark Albert	
	(Marie of Contact Forson)
Vintage Church	Tuc
- Vinge City	(Firm/ Company)
149 Longwood	St St Johns, Ft
$\mathcal{F}$	(Address)
St Johns, FL	32259
	(City/ State and Zip Code)
E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, please	se call:
Mark Albert	at 904-813-1731
(Name of Contact Perso	on) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida Department of State:
\$35 Filing Fee \$35 Certificate of Status	\$\text{\$\subseteq\$\$\\$\\$43.75 \text{ Filing Fee & Certified Copy (Additional copy is enclosed)} \$\subseteq\$\$\$\\$\\$
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

Ar	rticles of Amendment	
A	to ticles of Incorporation	The second secon
the second secon	of <sup>*</sup>	6 To
Vi €	Ntage (h)	Irsh INC
(Name of Corporation as cur	rrently filed with the Flo	orida Dept. of State)
N16000002368		<b>7</b>
(Document N	lumber of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not F</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	
11/4	<del></del>	and a
name must be distinguishable and contain the word "corp	noration" or "imporrorat	The new
"Company" or "Co." may not be used in the name.	oration of incorporal	sa or the aboveviation corp. or mc.
- 12 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11/1	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		a, enter the name of the
Name of New Registered Agent:	11/1	
Nume of New Negistered Agent.		
	<u> </u>	Clarita standarda da con
New Registered Office Address:	•	(Florida street address)
	(City)	, Florida (Zip Code)
	(City)	(Lip Code)
New Registered Agent's Signature, if changing Registe	ered Agent:	
I hereby accept the appointment as registered agent. I a	m familiar with and acce	pt the obligations of the position.
	11/1	

Signature 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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>vr</u>	Shawn Yar brough	5256 Timucac Cide St. Augustine, FL 32086
2) Change Add Remove	VP	Steve Champney	7325 AlA South St Augustine, FL 32080
3 ) Change Add Remove	VP.	Gieg Marksherry	11355 Great Commision Wa Orlands, FL 32832
4) Change Add Remove	<u>SV</u>	bary brubb	58 N. St. Augustine BIVK Str Augustine, FL 32080
5) Change Add Remove	VP	Nick-Edwards	10488 Creston blon Circle East Jacksonville, FL 32256
6) Change	<u>vp</u>	Scott Nickel	1310 Catalpa Place Evic, CO 80516
Remove		Page 2 of 4	

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

The date of each amendment(s) adoption: date this document was signed.	_, if other than the
Effective date if applicable: 09./08/20[L]  (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not b document's effective date on the Department of State's records.	e listed as the
Adoption of Amendment(s) (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.	
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 $\frac{10-13-2016}{10-13-2016}$	
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)  (Typed or printed name of person signing)	
(Title of person signing)	