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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Na	me)
(Dx	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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Name Change

SEP 28 2016 D CUSHING

COVER LETTER

Division of Corporations		
NAME OF CORPORATION: NEW CREATIONS 2 COR 5:17, DOCUMENT NUMBER: N16 00000 4828	INC	
DOCUMENT NUMBER: 19 6 0000 10 20		
The enclosed Anicles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
PAU SEUSY	_	
Name of Contact Person PAUL BENNETT SEUSY, P.A.	_	
Firm/ Company	_	
203 W. OAK ST.	_ 圣 紹 😽	
ARCADIA FL 34266 eity/State and Zip Code	SEP I	-
City/ State and Zip Code	_%;;; 	.
Paul @ Paul seusy. Com		7 V4
E-mail address: (to be used for future annual report notification)	2: 01	
For further information concerning this matter, please call:		
PAUL SEUSY at 863, 491-7285		
Name of Contact Person Area Code & Daytime Telephone Number	er	
Enclosed is a check for the following amount made payable to the Florida Department of State:		
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)		

TO: Amendment Section

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

ş.



August 25, 2016

PAUL SEUSY PAUL BENNETT SEUSY, P.A. 203 W. OAK ST ARCADIA, FL 34266

SUBJECT: NEW CREATIONS 2 COR 5:17, INC.

Ref. Number: N16000004828

We have received your document for NEW CREATIONS 2 COR 5:17, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Profit Corporation, but your entity is a Florida Nonprofit Corporation. Please complete and return the enclosed 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.

Diane Cushing Senior Section Administrator

Letter Number: 216A00018142

Articles of Amendment

to Articles of Incorporation

NEW CREATIONS (Name of Corporation as current	ntly filed with	the Flori	2.//	tate)		
N 16 00000 (Document Num	1482	<u> </u>		 ,		
(Document Num	ber of Corpora	ition (if kno	own)			
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this <i>Floria</i>	la Not For	Profit Corpo	ration adopts t	he fol	lowing
A. If amending name, enter the new name of the corporate	tion:		_			
NEW CREATION name must be distinguishable and contain the word "corpora	\overline{N} 2	Cor	5:1	17, INC	, Ti	ha naw
name must be distinguishable and contain the word "corpora	ition" or "inc	orporated'	or the abbre	viation "Corp.	or"	"Inc."
"Company" or "Co." may not be used in the name.		, 1				
B. Enter new principal office address, if applicable:	N/	/+				
Principal office address <u>MUST BE A STREET ADDRESS</u>)			3	<u>></u> 60	~
				1°-	<u>, </u>	-25
				\(\frac{1}{2}\)	# 179 	
C. Enter new mailing address, if applicable:	1/1	\boldsymbol{A}		1.		9
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)					l	-32
					,-	ĽΣ
						Ţ
						
D. If amending the registered agent and/or registered offines registered agent and/or the new registered office:		Florida, e	nter the nam	ie of the		
	1/A					
Name of New Registered Agent:	10//					
			·	<u></u>		
New Registered Office Address:		(F101	ida street addre:	rs)		
				Clarido		
New Desistand Agent's Signature if shanging Desistand				- '		
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa		id accept th	ne obligations	of the position	n.	
		•	0			

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>	Name	<u>Addres</u> s
1) Change	4-delina-de-la constitución	N/A	
Add			
Remove			
2) Change			-
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add	•		
Remove			
5) Change			
Add			
Kemove			
6) Change		•	
Add			
Remove			

attach additional sheets, if ne	ecessary). (Be	specific)	e(s) here:	•			
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The date of each amendment(s) adoption: VIA	, 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 does not meet the applicable statutory filing requirements, this date w document's effective date on the Department of State's records.	ill not be 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 9-16-2016	
Signature	
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)	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	