

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

Office Use Only



900300116149

06/16/17--01009--012 ++35.00

And

JUN 19 2017

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NEW ARK CHURCH OF TAMPA INC.  NAME OF CORPORATION:
N17000003887
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Haksoo Stephen Lee, Esq.
(Name of Contact Person)
Lee & Lazzara, PLLC
(Firm/ Company)
3804 West North B Street
(Address)
Tampa, FL 33609
(City/ State and Zip Code)
hlee@leelazzara.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
at
(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:
■\$35 Filing Fee

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

NEW ARK CHURCH OF TAMPA INC.

(Name of Corporation	as currently filed with the Flo	orida Dept. of State)
N17000003887		
(Docum	nent Number of Corporation (if I	known)
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Not F</i>	for Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
		The new
name must be distinguishable and contain the work "Company" or "Co." may not be used in the name		ed" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	ble: DDRESS )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u> )	
D. If amending the registered agent and/or registered new registered agent and/or the new register		, enter the name of the
	Haksoo Stephen Lee, Esq.	
Name of New Registered Agent;		
	3804 West North B Street (Florida street address)	
New Registered Office Address:	(,	TO THE SI PET BURY ESSY
	Tampa	33609 , Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		of the obligations of the position.
	2/	,
_	9/2	stered 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	<u>V</u> <u>Mik</u>	n Doe se Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Kim, Myeong	17551 Wellfield Ct.
Ađd			Lutz, Florida 33558
X Remove			
2) Change	<u>D</u>	Nieder, Alexander	17551 Wellfield Ct.
Add			Lutz, Florida 33558
X Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)  Article III should be changed to reflect the following:				
purposes, the making of distributions to organizations that qualify as exempt organization.				

The date of each a	mendment(s) adoption:	, if other than the
date this document	was signed.	
Effective date <u>if a</u>	pplicable:	
	(no more than 90 days after amendment file date)	
	nserted in this block does not meet the applicable statutory filing requirements, the date on the Department of State's records.	is date will not be listed as the
Adoption of Amen	idment(s) ( <u>CHECK ONE</u> )	
	nt(s) was/were adopted by the members and the number of votes east for the ame icient for approval.	ndment(s)
	nembers or members entitled to vote on the amendment(s). The amendment(s) we board of directors.	as/were
Dated	111/	
Signa	ature State of the	<del></del>
	(By the Chairman or vice chairman of the board, president or other officer-if a have not been selected, by an incorporator – if in the hands of a receiver, true other court appointed fiduciary by that fiduciary)	
	Mia Kim	
	(Typed or printed name of person signing)	
	Divector	
	(Title of person signing)	