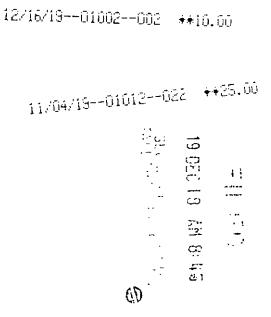
# N180000 2303

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



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LECHEDEDES

### COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Church Of God Christ Brutest -				
DOCUMENT NUMBER: <u>A) (80000 2303</u>				
The enclosed Articles of Amendment and fee are submitted for tilling.				
Please return all correspondence concerning this matter to the following:				
U/4350 SNa (Name of Contact Person)				
(Firm/ Company)				
2319 Say104 DR (Address)				
OR land D, FL 32808 (City/ State and Zip Code)				
319 Savoy O Gande Com  E-mail address (to be used for future annual report notification)				
For further information concerning this matter, please call:				
FNG 11/55C at 1-107-9341-9081 (Area Code) (Daytime Telephone Number)				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status  (Additional copy is enclosed)				

# <u>Mailing Address</u>

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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

(Name of Corporation as currently filed with the Florida D	ept. of State)					
N) 18000003303						
(Document Number of Corporation (if known)						
Pursuant to the provisions of section 617,1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following					
A. If amending name, enter the new name of the corporation of the distinguishable and contain the word "corporation of the name."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	TREVIEW FOR The new					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	39808 10 000 11					
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office at	e address in Florida, enter the name of the					
Name of New Registered Agent: 23	19 Sa VOY DR  (Florida sirves address)					
<u>New Registered Office Address:</u>	Rlando Florida 32808 (City) (Zip Code)					
New Registered Agent's Signature, if changing Registered .  I hereby accept the appointment as registered agent. I am fan	Agent:  niliar with and accept the abligations of the position.  2					
~ 'vii	parame of sevenegative agent fremanging					

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>Doe</u> Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Kange Add	Œ	Eia Ulysse	239 Savoyor ORLANDO, IL
2) Change Add	<b>1</b>	FNA WYSSE	9319 Javoy DK
Remove 3 ) Change Add	TIP	Jora Lundi	DHIH ATRIUM CIRLE
4) Change	VP	Gerond Monelus B	esc 6109 centerids
Remove 5) Change Add	<del></del>		37806
Remove 6) Change Add			
Remove		Page 2 of 4 <a href="mailto:rticles, enter change(s)">rticles, enter change(s)</a> here:  ). (Be specific)	# 6 F
	<u>.</u>		

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	Page 3 of 4	
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The date of each amendment(s) adopted date this document was signed.	ion:	, If other than the
Effective date if applicable:	(no more than 90 days after amendment file date	<u> </u>
	(no more than 90 days after amendment file date	7
Note: If the date inserted in this block d document's effective date on the Departs	loes not meet the applicable statutory filing requirement of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast fo	r the amendment(s)

Dated

Signature -

adopted by the board of directors.

(By the chairman of 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)

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(Title of person signing)

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