N18000003413

(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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October 24, 2023

AJAHN NATTAGUL 2676 LAMB LANE NAPLES, FL 34117

SUBJECT: WAT NAPLES DHAMMARAM CO.

Ref. Number: N18000003413

We have received your document for WAT NAPLES DHAMMARAM CO. and your check(s) totaling \$43.75. 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 Not for Profit 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.

Morgan E Lovett Regulatory Specialist II

Letter Number: 623A00024715

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COVER LETTER

TO: Amendment Section Division of Corporations

Wat Naples Dhammaram Co.

NAME OF CORPORATI	ON:				
	N18000003413				
DOCUMENT NUMBER:					
The enclosed Articles of Ar	nendment and fee are sub	omitted for filing.			
Please return all correspond Ajahn Nattagul	lence concerning this mat	ter to the following:			
		(Name of Contact	Person)		_
		(Firm/ Compa	nny)		
2676 Lamb Lane					
Naples, FL 34117		(Address)			
naplesthammaram@gmail.c	com	(City/ State and Zi	p Code)		
I	mail address: (to be use	d for future annual	report notification	n)	
For further information con	cerning this matter, please	e call:			7
Nick			517	420-6448	maku. is
	(Name of Contact Person	1)	(Area Code)	(Daytime Telephone Number)	— <u>-</u> <u>-</u>
Enclosed is a check for the	following amount made p	ayable to the Florid	a Department of	State:	7
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fe Certified Copy (Additional copy enclosed)	Certif y is Certif	0 Filing Fee ficate of Status fied Copy itional Copy is osed)	C
Mailing Address		Street Address			

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

Wat Naples Dhammaram Co.

Name of Corporation as currently filed with the Flo	orida Dept. of State)
N18000003413	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida mendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adopts the following
a. If amending name, enter the new name of the con	rporation:
	The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u>X</u>)
 If amending the registered agent and/or registered new registered agent and/or the new registered of 	
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	(Florida Sireel address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi hereby accept the appointment as registered agent. I	istered Agent: I am familiar with and accept the obligations of the position.
	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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith					
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s				
1) Change Add							
Remove							
2) Change Add							
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: This organization is organized exclusively for religious purposes under section 501(c)(3) of the Internal Revenue							
Code, or corresponding sections of any future federal tax code; this includes, but is not limited to.							
To encourage and facilitate the study and practice of the teachings, philosophy, and tradition, of Theravada Buddhism; to							
provide ceremonial Puja's on Buddhist holidays and special occasions; to ruse funds necessary for the care, housing, and							
residence of ordained Theravadin Buddhist monks and novices of the Dhammayut Nikaya.							

		
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The date of each amandment(a) a	10/13/2023	To advantage of
date this document was signed.	toption:	. if other than the
Effective date if applicable:	(no more than 90 days after amendment file o	
	(no more than 90 days after amendment file t	date)
<u>Note:</u> If the date inserted in this blo document's effective date on the De	ck does not meet the applicable statutory filing requ partment of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cas al.	t for the amendment(s)

(Title of person signing)