N1800000 3768

(R	Requestor's Name)
(A	address)
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C. GOLDEN

MAR 2 3 2019

COVER LETTER

TO: Amendment Section
Division of Corporations

MARKE OF CORPORATION	munity Church, Inc.
N18000003768 DOCUMENT NUMBER:	·
The enclosed Articles of Amendment and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
Ron Baker	
	(Name of Contact Person)
Bayshore Community Church, Inc.	
·	(Firm/ Company)
P.O. Box 4342	
	(Address)
N. Fon Myers, FL 33918	
	(City/ State and Zip Code)
rondenisebaker@gmail.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	lease call:
Ron Baker	239 543-5683
(Name of Contact Pe	
Enclosed is a check for the following amount made	de payable to the Florida Department of State:
S35 Filing Fee S43.75 Filing Fee Certificate of Sta	te & S43.75 Filing Fee & S52.50 Filing Fee tus Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
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

FILED

Articles of Amendment to

2019 HAR 13 AH 8: 41 Articles of Incorporation

Bayshore Community Church, Inc.		
(Name of Corporation as	currently filed with the F	orida Dept. of State)
Bayshore Community Church, Inc.		
(Documen	t Number of Corporation (i	known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not	For Profit Corporation adopts the following
A. If amending name, enter the new name of the co	erporation:	
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	orporation" or "incorpora	The new ead or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>)	<u> </u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florid office address:	a, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)
		. Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registeredy accept the appointment as registered agent. I	stered Agent: ' am familiar with and accep	ot the obligations of the position.
	Signature of New Regi	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>Mi</u>	hn Doe ke Jones Ily Smith	
Type of Action (Check One)	Title	<u>Na:ne</u>	<u>Addres</u> s
1) Change	VPD	Mark Jeter	
Add X Remove			
2) Change	STD	Mark Means	
Add X Remove			
3) Change	VPD	Ray Ruehle	71 Sam Houston Dr.
X Add			N. Fort Myers, FL 33917
Remove			
4) Change	STD	Chuck Wysong	15554 Horseshoe Lane
X Add			Fort Myers, FL 33905
Remove			
S) Change			
Add			
Remove			
6) Change			
Add			
Remove			

lf amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)		
			
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<u> </u>			

The date of each amendment(s) adop	March 7, 2019 tion:	_, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	· · · · · · · · · · · · · · · · · · ·
Note: If the date inserted in this block locument's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will not be timent of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop was/were sufficient for approval.	ted by the members and the number of votes east for the amendment(s)	
There are no members or members adopted by the board of directors.	s entitled to vote on the amendment(s). The amendment(s) was/were	
Dated <u>3-7</u>	2019	
Signature Kas V	ne Bake	_
have not been s	n or vice chairman of the board, president or other officer-if directors elected, by an incorporator – if in the hands of a receiver, trustee, or ointed fiduciary by that fiduciary)	
Ron Baker		
	(Typed or printed name of person signing)	
President		
	(Title of person signing)	