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COR AMND/RESTATE/CORRECT OR O/D RESIGN FREEDOM CHRISTIAN FELLOWSHIP, INC.

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C. GOLDEN

MAY 25 2018

TO: Amendment Section

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COVER LETTER

Division of Corporations		
FREEDOM CHRIS	STIAN FELLOWSHIP, I	NC.
NAME OF CORPORATION:		
N18000004427		
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Chey	enne Moseley	
	(Name of Contact Person	1)
Legat	room.com, Inc.	
	(Firm/ Company)	
101 N. Bra	nd Blvd., 11th Floor	
	(Address)	
Glend	ale, CA 91203	
	(City/ State and Zip Cod	u)
jybinspired@gmail.com		
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
Chavanna Macalay	800	773-0888 ext. 9724
Cheyenne Moseley		ode & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
☐ \$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	□\$52.50 Filing For Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Buikling xecutive Center Circle ssee, FL 32301

The contract of the contract o

FILED

Articles of Amendment to Articles of Incorporation of

2018 MAY 24 AM 9: 34

SECRETARY OF STATE TALLAHASSEE. FLORIDA

(Name of Corporation as currently filed	with the Flo	rida Dept. of State)	
FREEDOM CHRISTIAN FELLOWSHIP. INC		VI COLLEGE	
		orporation (if known)	
		•	
arsuant to the provisions of section 617.1006, Flonendment(s) to its Articles of Incorporation:	orida Slatute	es, this <i>Florida Not For Profit Corporation</i> adopt	ts the folk
If amending name, enter the new name of the	be corporati	on:	
A L. distributed and analysis of a	-d "an	tion" or "incorporated" or the abbreviation "Co	7he
me must be distinguishable and contain the wor [owepany" or "Co." may not be used in the nan	•	ноп от теогрогива от те аботечаной Со	vp. or i
Enter new principal office address, if applic	-ahie-	660 Hooks Street #14	
rincipal office address MUST BE A STREET		Clermont, FL 34711	
			 -
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	(BOX)	660 Hooks Street #14	
	Clement, FL 34711		
If amending the registered agent and/or reg new registered agent and/or the new registe			
bem reducted about motors and haw assure	HEO VINE A	ourse.	
Name of New Registered Agent:			
660 He	looks Street		
New Registered Office Address:		(Florida street addrers)	
Clermo	ont	, Florida ³⁴⁷¹¹	
	(City)	_	Code)
w Registered Agent's Signature, if chausing wrehy accept the appointment as registered agen		Agent: niliar with and accept the obligations of the posit	ion.
·	-		
Signat	ture of New .	Registered Agent, if changing	

Page I of 4

والمراجع والمراجع والمراجع والمراجع والمناجع والمراجع والمراجع والمراجع والمناطق والمراجع والمناطق والمراجع والم والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراع

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:

and the second s

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = ChiefExecutive 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	V Mi	<u>in Doc</u> ke <u>-lones</u> ly Smìth	
Type of Action (Check One)	<u>Title</u>	Name	<u>Ad</u> dre <u>es</u> s
1) X Change	PD	Brenda June Boykin	660 Hooks Street #14
Add			Clermont, FL 34711
Remove			
2) X Change	D	Lia Crumby	660 Hooks Street #14
Add		,	Clermont, FL 34711
Remove X Change	D	Paul Simmons	660 Hooks Street #14
Add			Clermont, FL 34711
Remove			
4) X Change	TSD	Jill Young	660 Hooks Street #14
Add			Clermont, FL 34711
Remove			
5) X Change	D	Dannie L. Boykin	660 Hooks Street #14
Add			Clermont, FL 34711
Remove			
6) Change			
Add			
Remove		Page 2 of 4	···

of 4

مند براز الراز ال

The date of each amendment(s) add date this document was signed.	option: 5/9/2018	, if other than th
Effective date if applicable:	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes east for the amendment(s)	
There are no members or members adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
Dated May	p 17, 2018	
	nan or vice chairman of the board, president or other officer-if directors	_
	n selected, by an incorporator — if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)	
	Brenda June Boykin	
	Brenda June Boykin Typed or printed name of person signing)	

Company of the compan