NR399

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OCT 2 9 2018 S. YOUNG B OCT 23 AN C+ OS SCRUTARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	vsnip Ministries, INC	. dba Life Chi	irch
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matter	to the following:		
Debbie Sipple			
	(Name of Contact Pe	rson)	
New Covenant Fellowship, Ministries, INC, dba Life C	`hurch		
	(Firm/ Company)	
11735 Plantation Road			
	(Address)		
Fort Myers, FL 33966-1342			
(City/ State and Zip C	lode)	
debbie@lifechurch.bet			
E-mail address: (to be used	for future annual repo	ort notification)
For further information concerning this matter, please of	rail:		
Debbie Sipple	at	239	939-5433 Ext: 1019
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pay	able to the Florida D	epartment of S	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & □ Certificate of Status		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Am Div Clit	eet Address endment Sectivision of Corporton Building 1 Executive Co	rations

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

New Covenant Fellowship Ministries, INC, dba Life Church (Name of Corporation as currently filed with the Florida Dept. of State) N18399 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp," or "Inc," "Company" or "Co," may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: _. Florida __ (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:

Signature of New Registered Agent, if changing

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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: $\frac{X}{X}$ Change $\frac{X}{X}$ Remove $\frac{X}{X}$ Add	PT John Do V Mike Jo SV Sally St	ones .	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	Sec	Paul Scoggins	1290 Medina Drive
Add			Fort Myers, FL 33919
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			-
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		D 2.54	

attach additional sheet	g additional Ar ts, if necessary).	. (Be specifi	c)				
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date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated 10/17/18
Signature (By/he chairman or 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)
Ryan D. Deaton (Typed or printed name of person signing)
Pancidant
(Title of person signing)

. . . .