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OCT 2.4 2018

COVER LETTER

TO: Amendment Section Division of Corporations

Hope Luthern Church - Gulf Cove. Inc. NAME OF CORPORATION:
N18587 DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Nancy M, Frey
(Name of Contact Person)
Hope Lutheran Church - Gulf Cove
(Firm/ Company)
14200 Hopewell Avenue
(Address)
Port Charlotte, Fl 33981
(City/ State and Zip Code)
Hopeluthern@comcast.net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Cheryl Burke 941-629-7171 at
(Name of Contact Person) (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) ☐ \$52.50 Filing Fee Certificate of Status (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

Articles of Amendment to Articles of Incorporation of

Hope Luthern Church - Gulf Cove. Inc.		
(Name of Corporation as curren	tly filed with the Flori	da Dept. of State)
N18587		
(Document Numb	er of Corporation (if kn	own)
Pursuant to the provisions of section 617,1006. Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
Hope Lutheran Church - Gulf Cove, Inc.		The new
name must be distinguishable and contain the word "corporal "Company" or "Co." may not be used in the name.	ion" or "incorporated	
B. Enter new principal office address, if applicable:		2
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	•	28 1
C. Enter new mailing address, if applicable:		AK mar P
(Mailing address MAY BE A POST OFFICE BOX)		
		製
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		enter the name of the
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:	
New Registered Agent's Signature, it changing Registered I hereby accept the appointment as registered agent. I am far		he obligations of the position.
· · · · · · · · · · · · · · · · · · ·	•	
Si	gnature of New Registe	red 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	PT John V Mike SV Sally	<u>Doe</u> Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Jill Mead	3059 Holcomb Road
Add			Port Charlotte, FL 33981
X Remove			
2) X Change	P	Cheryl Burke	18314 Wolbrette Circle
Add			Port Charlotte, Fl 33981
Remove			
3) Change	<u>VP</u>	Thomas Harrison	3475 Blitman Street
X Add			Port Charlotte, FL 33981
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
			
Add			
Remove			

L. If amending or adding a (attach additional sheets,	dditional Articles, (enter change(s) h specific)	<u>ere</u> :		
· ·	y mecessary, (De	specific)			
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	<u>-</u>		<u>-</u> ,		
				 	
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		October 09, 2018	
ľhe	date of each amei	ndment(s) adoption:	, if other than the
late	this document was	signed.	
٠	•	October 09, 2018	
Effe	ctive date <u>if appli</u>		
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this date will are on the Department of State's records.	not be listed as the
A do	ption of Amendm	ent(s) (CHECK ONE)	
	The amendment(s was/were sufficier) was/were adopted by the members and the number of votes cast for the amendment(s) at for approval.	
	There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
	Dated	October 09, 2018	
	Signature		
		(By the 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)	
		Cheryl Burke	
		(Typed or printed name of person signing)	
		President Cheryl Buche	
		(Title of person signing)	