N19000001342

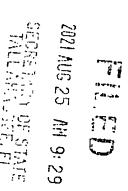
(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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COVER LETTER

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TO: Amendment Section Division of Corporations

New Life Christian Church o NAME OF CORPORATION:	of Spring Hill, Inc	c	
N19000001342			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted for	or filing.		
Please return all correspondence concerning this matter to the	following:		
Al D. Squitieri			
(Name o	of Contact Perso	on)	
New Life Christian Church of Spring Hill			
(Fir	rm/ Company)		
275 Della Court			
	(Address)		
Spring Hill, Florida, 34606			
(City/ S	tate and Zip Cod	le)	
al.squitieri@newlife-christian.com			
E-mail address: (to be used for futu	ire annual report	notification)
For further information concerning this matter, please call:			
Al D. Squitieri		2	5565038
(Name of Contact Person)	(A)	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payable to	the Florida Dep	partment of S	State:
	fied Copy itional copy is	Certific Certific	Filing Fee cate of Status ed Copy onal Copy is sed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

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

7021 AUG 25 AH 9-29

New Life Christian Church of Spring Hill Inc.

N19000001342	SECTION OF STA
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation;	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	<u>ion:</u>
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	The new tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	275 Della Court
	Spring Hill, Florida 34606
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	275 Della Court
	Spring Hill, Florida 34606
D. If amending the registered agent and/or registered offic	ce address in Florida, enter the name of the
new registered agent and/or the new registered office a	ddress:
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent: miliar with and accept the obligations of the position.
	gnature 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	PT John De V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add	<u>VT</u>	John C. Carver	34 Seven Hills Drive Spring Hill, FL 34609
x Remove			
2) × Change Add	VT	Dennis Deright	34 Seven Hills Drive Spring Hill, FL 34609
Remove 3)	<u>S</u>	David Zack	275 Della Court Spring Hill, FL 34609
4) Change Add	<u> </u>	Jerry Jordan	275 Della Court Spring Hill, Court 34609
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
-			

Dated 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) Al D. Squitieri
	(Typed or printed name of person signing)
	President

■ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.