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COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: Legacy	liew Church Inc.
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DOCUMENT NUMBER: <u>\$\sqrt{19000035}</u>	78
The enclosed Articles of Amendment and fee are submit	ted for filing.
Please return all correspondence concerning this matter to	o the following:
Carla Nunn	
(1)	iame of Contact Person)
Legacy View Church Inc.	
	(Firm/ Company)
28 Juniper Pass Terrace	
	(Address)
Ocala, FL 34480	
(C	City/ State and Zip Code)
Cnunn 85@yah co. com VE-mail address: (to be used for	or future annual report polification)
For further information concerning this matter, please ca	
Carla Nunn (Name of Contact Person)	at 352-598-8805
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made paya	ble to the Florida Department of State:
	\$43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section	Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

Logacy View Church Inc.	· ·			
(Name of Corporation as curre	ently filed with the F	orida Dept, of State)		
N19000003578				
(Document Nun	nber of Corporation (it	fknown)		
Pursuant to the provisions of section 617,1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not</i>	For Profit Corporation adopts	s the following	
A. If amending name, enter the new name of the corpora	ation:			
name must be distinguishable and contain the word "corpor	antine" as "imparences	tad" on the abbumistion "Con	The new	
"Company" or "Co," may not be used in the name.	alion or incorpora	lea or the appreviation Cor]	p. or mc.	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS		<u> </u>		
in the part office and the same same same same same same same sam		,	· · · · · · · · · · · · · · · · · · ·	
		! !		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA			Tan Care of
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D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		la, enter the name of the		
Name of New Registered Agent:	1			
<u> </u>	-			
New Registered Office Address:		(Florida street address)		
		, Florida	 	
	(City)	(Zip Code	·)	
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am J		ept the obligations of the posit	ion.	
	Signature of New Res	zistered 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 D V Mike J SY Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change	<u>S_</u>	Carlina Nunn	2905 S.W. 15th Street Ocala, FL 34480
X Remove			
2) Change			
Add Remove			
3) Change			
Add			
4) Change			
Add Remove			
5) Change			
Add			
Remove			
6) Change Add			
Remove			

ttock additional shoots	dditional Articles.	enter change(s)	<u>here</u> :				
ttach additional sheets,	ij necessary), '(Be	specific)					
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The date of each amendment(s) adoption	1: <u>6/25/19 6/27/19</u>	, if other than the
late this document was signed. Effective date <u>if applicable</u> :	119° 6/27/19	
	(no more than 90 days after amendment f	île date)
Note: If the date inserted in this block doe document's effective date on the Departme		equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes of	east for the amendment(s)
There are no members or members en adopted by the board of directors.	stitled to vote on the amendment(s). The a	mendment(s) was/were
Dated 6/29/19		
Signature		
have not been sele	r vice chairman of the board, president or cted, by an incorporator – if in the hands of ted fiduciary by that fiduciary)	
	(Typed or printed name of persor	L cigning)
	(1 yped of printed name of person	i siguing,
presi	ilent / pastor (Title of person signing)	
ı	(Title of person signif	ng)