## N 1900000 5680

(Re	equestor's Name)				
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATE	BE, Orlando Humani ON:	ist Fellowship	<del></del>			
DOCUMENT NUMBER:	N19000005680					
The enclosed Articles of An	nendment and fee are subr	nitted for filing.				
Please return all correspond	ence concerning this matte	er to the following:				
Tee Rogers						
	<del></del>	(Name of Contact I	erson)			
BE. Orlando Humanist Fell-	owship					
		(Firm/ Compar	ıy)		<del></del>	
PO Box 677693						
		(Address)	-		-	
Orlando, FL 32867						
		(City/ State and Zip	Code)			·-
be@justgottabe.org						10 P
E	-mail address: (to be used	for future annual re	port notification	on)		<del>-</del> ====================================
For further information conc	erning this matter, please	call:			ī,	
Tec Rogers		я	407 t	608-9242	  	SHOLLWUCESCO.
	(Name of Contact Person)			(Daytime Telepho		
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida	Department of	State:		SKS
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fed Certified Copy (Additional copy enclosed)	Certi is Certi (Add	50 Filing Fee ficate of Status fied Copy itional Copy is osed)		
Mailing Address  Amendment Section			reet Address mendment Sec	tion		

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 to Articles of Incorporation of

BE. Orlando Flumanist Fellowship , Lwc.		
(Name of Corporation as cur	rently filed with the Florida Dept. of State)	
N19000005680		
(Document Nu	umber of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation adop	its the following
A. If amending name, enter the new name of the corpo	ration:	
		The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Co	orp," or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u> )	<u>SS</u> )	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )		
		19 JUN 10 PM 5: 55
D. If amending the registered agent and/or registered o	office address in Florida, enter the name of the	0 5
new registered agent and/or the new registered offic		7
Name of New Registered Agent:		<b>બા</b> ડ્
		<u> </u>
New Registered Office Address:	(Florida street address)	
	, Florida	
	(City) (Zip Cod	e)
New Registered Agent's Signature, if changing Register	red Agent:	
hereby accept the appointment as registered agent. I am		tion.
	Signature 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 Do V Mike Jo SV Sally Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) X Change	Dir	Jocelyn Williamson	PO Box 677693
Add			Orlando, FL 32867
Remove			
2) X Change	Dir	Debra Van Neste	PO Box 677693
Add			Orlando, FL 32867
Remove			
3) Change			
Add			
Remove			
<del></del>			
4) Change			
Add			
Remove			
5) Change			
Add			<del></del>
Remove			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)					
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The	date of each ame	ndment(s) adoption:	if other than the
	this document was		
Effe	ective date <u>if appli</u>	cable:	
	<del></del>	(no more than 90 days after amendment file date)	
		ted in this block does not meet the applicable statutory filing requirements, this date will not ate on the Department of State's records.	be listed as the
Ade	option of Amendm	ent(s) ( <u>CHECK ONE</u> )	
	The amendment(s was/were sufficient	) was/were adopted by the members and the number of votes east 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	6/5/2019	
	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)	
		Tee Rogers	
		(Typed or printed name of person signing)	
		Founding Director and Humanist Chaplain	
		(Title of person signing)	