

N19887

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

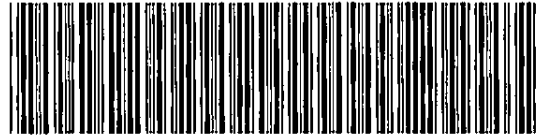
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

650

Office Use Only



900318258899

09/17/18--01021--016 **35.00

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

18 OCT -3 PM 2:46

FILED

OCT 04 2018

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

18 OCT -3 PM 3:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

September 20, 2018

RONDA RIEVES
CALVARY CHURCH OF THE NAZARENE
750 ROGER WILLIAMS ROAD
APOPKA, FL 32703

SUBJECT: FIRST HAITIAN CHURCH OF THE NAZARENE OF APOPKA, INC.
Ref. Number: N19887

We have received your document for FIRST HAITIAN CHURCH OF THE NAZARENE OF APOPKA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 118A00019626

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: First Haitian Church of the Nazarene of Apopka, Inc.

DOCUMENT NUMBER: N19887

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ronda Rieves

(Name of Contact Person)

Calvary Church of the Nazarene

(Firm/ Company)

750 Roger Williams RD

(Address)

Apopka, FL 32703

(City/ State and Zip Code)

ronda@calnaz.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ronda Rieves

407

889-2148

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:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(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

First Haitian Church of the Nazarene of Apopka, Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

N19887

(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:

The new 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:

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

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

Signature of New Registered Agent, if changing

FILED
18 OCT -3 PM 2:46
TALLAHASSEE, FLORIDA

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

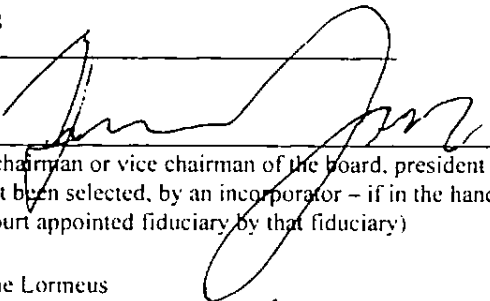
Effective date if applicable: 9-11-18
(no more than 90 days after amendment file date)

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.

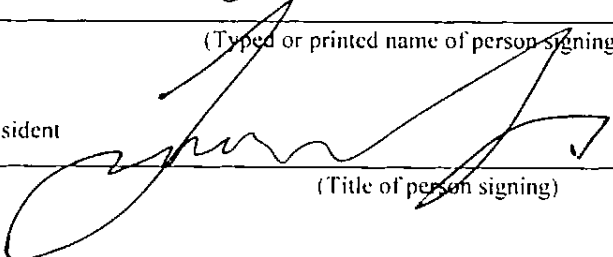
Adoption of Amendment(s) (CHECK ONE)

- ☐ 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 9/26/18

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)

Phane Lormeus
(Typed or printed name of person signing)

President 
(Title of person signing)