## N19938

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Amendicus

APR 28 2020 I ALBRITTON

## **COVER LETTER**

TO: Amendment Section Division of Corporations

P.O. Box 6327

Fallahassee, FL 32314

NAME OF CORPORATION:	SILVER SPRIN JEHOVAH'S WI			ONGREGATION OF
DOCUMENT NUMBER:	N19938			
The enclosed Articles of Amendment a	nd fee are submitted for filing			
Please return all correspondence concer	ming this matter to the following	ng:		
DARRELL B.	EDWARDS	<del></del>		
	(Name of Com	act Perso	ni)	
	· · (Firm/ Cor	nnunu\	<del>-</del>	
	Thing Cor	npany)		
9301 BAHIA	TRACK WAY			
	(Addre	ss)		
OCALA, FL	<del></del>			
	(City/ State and	Zip Coo	de)	
	Picloud.com			
	ss: (to be used for future annu	al report	notification	1)
For further information concerning this	matter, please call:			
DARRELL B. EDWARDS		at !	(352)	804-0652
(Name of C	ontact Person)	(A	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following an	nount made payable to the Flo	rida Dep	partment of !	State:
(\$35 Filing Fee <b>≭\$</b> 43.75 F Certific:	Filing Fee & S43.75 Filing ate of Status Certified Cop (Additional cenclosed)	y	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section			Address dinent Secti	
Division of Corporation	ons		ament Secti on of Corpo	*

The Centre of Tallahassee

Fallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment

## to Articles of Incorporation

(Name of Corporation as currently filed with the Florid		ON OF JER	OVAH'S W.	LINES	SES,
N19938	· · · · · · · · · · · · · · · · · · ·				
(Document Num	nber of Corporation	(if known)			
Pursuant to the provisions of section 617,1006, Florida Stat amendment(s) to its Articles of Incorporation:	utes, this <i>Florida Ne</i>	ot For Profit Ce	erperation adop	ts the fo	llowing
A. If amending name, enter the new name of the corpor	ration:				
N/A				r	he new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incorpo	rated" or the al	hreviation "Co.	rp." or	"Inc."
B. Enter new principal office address, if applicable:		N/A			
(Principal office address MUST BE A STREET ADDRES	<u>S</u> )				
	<del></del>			22	<del></del>
			· -	1.P12	
C. Enter new mailing address, if applicable:					1
(Mailing address MAY BE A POST OFFICE BOX)	<del></del>	N/A		<del>-</del> P	
			:		
	<del></del>		· · ·	<u>_</u>	
		<del></del> .	<u>.</u>		
D. If amending the registered agent and/or registered of	ffice address in Flor	rida, enter the	name of the		
new registered agent and/or the new registered office	address:				
Name of New Registered Agent:	N/A				
<u></u>					
New Registered Office Address:	(Florida street address)				
	N/A		N/A		
	(City)		Florida (Zip Code		<del></del>
			(isip) Citie	,	
New Registered Agent's Signature, if changing Registered liberally accept the appointment as registered agent. I am j	<mark>ed Agent:</mark> familiar with and ac	cept the obligat	ions of the posit	ion.	
		N/A			
	Signature of New Re		if changing	<del></del>	

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:

F President; V Vice President: T= Treasurer; S= Secretary; D= Director; TR= Trustec; 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 beld. 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 Lioe, PT as a Change Mike Jones, V as Remove, and Sally Smith, SV as an Add.

hxample: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>fitle</u>	Name	<u>Addres</u> s
1)Change Add	Т	ROLAND ANAZIA	33 HEMLOCK CRT PASS  OCALA, FL 34472
X Remove  2) Change X Add	T	DAVID K. PLANT	729 A MIDWAY DR.  OCALA, FL 34472-230
Remove Change Add Remove			
4) Change Add			
Remove Change Add			
Change Add			
F., <u>If amending or adding</u> cattach additional shee	g additional Arti ts. if necessary).	<u>cles, enter change(s) here:</u> (Be specific)	

_	
	JANUARY 1, 2020
The date of each amendment(s) ado date this document was signed.	ption:, if other than the
Effective date if applicable:	JANUARY 1, 2020
······································	(no more than 90 days after amendment file date)
Note: If the date inserted in this block document's effective date on the Department.	c does not meet the applicable statutory filing requirements, this date will not be listed as the artment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)

S	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 APRIL 9, 2020
	Signature Josef Jue Brew
	(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)
	DARRELL BRUCE EDWARDS
	(Typed or printed name of person signing)
	PRESIDENT'
	(Title of person signing)