## N20000010103

| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| The Fellowsh NAME OF CORPORATION:               | ip 30A, Inc.  |                           |  |  |  |
|---|---|---------------------------|--|--|--|
| N20000010703 DOCUMENT NUMBER:                   |   |                           |  |  |  |
| The enclosed Articles of Amendment and fee a    | re submitted for filing.  |                           |  |  |  |
| Please return all correspondence concerning thi | s matter to the following:  |                           |  |  |  |
| Gary Wingo                                      |   |                           |  |  |  |
|   | (Name of Contact I  | Person)                   |  |  |  |
| <u> </u>  | (Firm/ Compar   |                           |  |  |  |
| 329 Woodbeach Drive                             |   |                           |  |  |  |
| · <del></del>                                   | (Address)   |                           |  |  |  |
| Santa Rosa Beach, FL 32459                      |   |                           |  |  |  |
|   | (City/ State and Zip  | Code)                     |  |  |  |
| elwingo@yahoo.com                               |   |                           |  |  |  |
| E-mail address: (to b                           | oe used for future annual re  | eport notification        | on)  |  |  |
| For further information concerning this matter, | please call:  |                           |  |  |  |
| Robert McCullar, CPA                            | а   | 850<br>.t                 | 622-0888   |  |  |
| (Name of Contact                                |   |                           | (Daytime Telephone Number)   |  |  |
| Enclosed is a check for the following amount n  | nade payable to the Florida   | Department of             | f State:   |  |  |
| ☐ \$35 Filing Fee                               | ce & \$\subseteq\$\$\\$43.75 \text{ Filing Fertition Copy}\$\$ (Additional copy enclosed) | Certi<br>is Certi<br>(Add | 50 Filing Fee<br>ficate of Status<br>fied Copy<br>itional Copy is<br>osed) |  |  |
| Mailing Address                                 |   | Street Address            |  |  |  |
| Amendment Section                               |   | Amendment Section         |  |  |  |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 5, 2022

THE FELLOWSHIP 30A, INC GARY WINGO 329 WOODBEACH DRIVE SANTA ROSA BEACH, FL 32459

SUBJECT: THE FELLOWSHIP 30A, INC

Ref. Number: N20000010703

We have received your document for THE FELLOWSHIP 30A, INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **NOT FOR PROFIT** corporation it must be signed 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.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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) 245-6939.

Stacy Prather Regulatory Specialist III

160

www.sunbiz.org

Letter Number: 622A00026814

## Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as currently filed with the  | e Florida Dept. of State)               | U.55                                   |  |  |
|---|---|--|--|--|
| The Fellowship 30A, Inc.  |   | . 6                                    |  |  |
| (Docum  | ment Number of Corporation (if know     | n)                                     |  |  |
| Pursuant to the provisions of section 617.1006, Flo<br>amendment(s) to its Articles of Incorporation: | orida Statutes, this Florida Not For Pi | rofit Corporation adopts the following |  |  |
| amendment(s) to his introdes of meorporation.   |   | <u> </u>                               |  |  |
| A. If amending name, enter the new name of th   | e corporation:                          | :. P                                   |  |  |
|   |   | The new                                |  |  |
| name must be distinguishable and contain the word   | d "corporation" or "incorporated" o     | r the abbreviation "Corp." or "Inc."   |  |  |
| "Company" or "Co." may not be used in the nam   | <u>e</u> .                              |  |  |  |
| B. Enter new principal office address, if applica   |   |  |  |  |
| (Principal office address MUST BE A STREET A  | <u>ADDRESS</u> )                        |  |  |  |
|   | <u></u>                                 |  |  |  |
|   |   |  |  |  |
| C. Enter new mailing address, if applicable:  |   |  |  |  |
| (Mailing address MAY BE A POST OFFICE   | <u>BOX</u> )                            |  |  |  |
|   |   |  |  |  |
|   |   |  |  |  |
|   |   |  |  |  |
| D. If amending the registered agent and/or regi   | stered office address in Florida, en    | ter the name of the                    |  |  |
| new registered agent and/or the new register  | red office address:                     |  |  |  |
| Name of New Registered Agent:   | Gary Wingo                              |  |  |  |
|   | 329 Woodbeach Drive                     |  |  |  |
|   | (Florida                                | a street address)                      |  |  |
| New Registered Office Address:  | :                                       |  |  |  |
|   | Santa Rosa Beach                        | , Florida <u>32459</u>                 |  |  |
|   | (City)                                  | (Zip Code)                             |  |  |
| New Registered Agent's Signature, if changing   | Rouistered Agent                        |  |  |  |
| I hereby accept the appointment as registered ager  | nt. I am familiar with and accept the   | obligations of the position.           |  |  |
|   | Genry WL                                |  |  |  |
| -   | 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 | nes  |                            |
|--|--|--|----------------------------|
| Type of Action<br>(Check One)                      | <u>Title</u>   | Name                                       | <u>Addres</u> s            |
| 1) Change Add                                      | ST   | Art Lee Drewes                             | Santa Rosa Beach, FL 32459 |
| × Remove   |  |  | Brandon Lee Hayes          |
| 2) Change Add                                      |  |  |                            |
| Remove 3) Remove Add Remove                        |  |  |                            |
| 4) Change Add                                      | <del></del>  |  |                            |
| Remove   |  |  |                            |
| 5) Change<br>Add                                   |  |  |                            |
| Remove   |  |  |                            |
| 6) Change Add                                      |  |  |                            |
| Remove   |  |  |                            |
| E. If amending or addin<br>(attach additional shee | ag additional Arti   | icles, enter change(s) here: (Be specific) |                            |
|  |  |  |                            |
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| The date of each date this documents  | h amendment(s) ade<br>ent was signed.                  | option:             |                  |                   |                  | 11 -                                   | omer man the           |
| Vication data !!                      | f annlicable:  | Arunt 15.           | 2022             |                   |                  |  |                        |
| Enecuve date ii                       | h amendment(s) add<br>int was signed.<br>f applicable: | (no more than       | 90 days after a  | mendment file de  | ate)             |  |                        |
| Note: If the date                     | e inserted in this bloc                                | k does not meet the | applicable state | itory filing requ | irements, this d | ate will not be lis                    | sted as the            |

document's effective date on the Department of State's records.

(CHECK ONE)

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

Signature