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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Salvation	City Incor	poratec	
DOCUMENT NUMBER: N200001	1432	•	
The enclosed Articles of Amendment and fee are subt	•	· · · · · ·	
Please return all correspondence concerning this matte	_		
	is to the following.		
Joel Maillet		_,.	
	(Name of Contact Person	on)	
Salvation City Incorpor	nted	···	
	(Firm/ Company)		
602 Kings Care #			
	(Address)		
Brandon, FL 33511			
	(City/ State and Zip Co	de)	
Salvation city church agmaile	′ <i>[/</i> ////		
E mail address: (46 be used	for future annual repor	t notification	n)
For further information concerning this matter, please	call:		
Juel Maillet	at	813	464-4463 (Daytime Telephone Number)
(Name of Contact Person)) (/	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida De	partment of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi) Filing Fee icate of Status ied Copy tional Copy is escd)
Mailing Address Amendment Section		t Address idment Secti	ion.
Division of Corporations	_	ion of Corpo	
P.O. Box 6327	The C	Centre of T	allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

Salvation Lity Incorporated	40		
(Name of Corporation as currently filed with the Florida	Dept. of State)		
N200000 [1432	6.6	· · · · · · · · · · · · · · · · · · ·	
(Document Numt	per of Corporation (if	Known)	
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not I</i>	For Profit Corporation adopts the follo	owing
A. If amending name, enter the new name of the corpora	tion:		
NIA		The	e new
name must be distinguishable and contain the word "corpore	ntion" or "incorporat	ed" or the abbreviation "Corp." or "I	Inc."
"Company" or "Co." may not be used in the name.	1111		
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
	· · · · · · · · · · · · · · · · · · ·		:
			;
C. Enter new mailing address, if applicable:	A . / A		
(Mailing address MAY BE A POST OFFICE BOX)	<u> N/A</u>		<u>ಸ_</u>
			· 23 PH 1: 147
			==
D. If amending the registered agent and/or registered off	ice address in Florid	a, enter the name of the	
new registered agent and/or the new registered office	<u>address:</u>		
Name of New Registered Agent:	7		
		Florida street address)	
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for		ot the obligations of the position.	
	ignature of New Revi	stered 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 I V Mike J SV Sally S	<u>lones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
l) Change Add	<u>M</u>	Andrew Vance	9104 Manfair Camellia Ln Riverview, FL 33578
Remove 2) X Change Add	5_	Brittany Maillet	602 Kings Care Brandy, FE 33511
Remove 3) Remove Add Remove			
4) Change Add			
Кепюче			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or add		ticles, enter change(s) here: (Be specific)	
Please note	that Andrew	Vance was erroneously filed	las a Manager"
whereas "m	anujer" is	Not a recognized office/	director in a Non-Profit
and is ther	efor being	removed.	
	<i>بـــ</i> ـــــــــــــــــــــــــــــــــ		

	
	
	
	
	
	
	
	
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The date of each amendment(s) adoption:	if other than the
date this document was signed.	
11/10/2020	
The date of each amendment(s) adoption: 1/14/2020 date this document was signed. Effective date if applicable:	
(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no document's effective date on the Department of State's records.	t be listed as the
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.	

Dated Signature	- 11/19/2020 Lu Huntel
V . S	(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Joel Maillet
	(Typed or printed name of person signing)

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.