N21000000224

(Requestor's Name) (Address) (Address)	700409385357			
(City/State/Zip/Phone #)	の は 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
(Business Entity Name) (Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer: w/09/23				

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August 29, 2023

THE REV. ADRIENNE R. HYMES 3836 FLATIRON LOOP, SUITE 101 WESLEY CHAPEL, FL 33544 US

SUBJECT: ST PAULS EPISCOPAL CHURCH WESLEY CHAPEL, INC.

Ref. Number: N21000000224

We have received your document for and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

If you have any further questions concerning your document, please call (850) 245-6000.

Letter Number: 523A00020173

Summer Chatham Regulatory Specialist III Director's Office

www.sunbiz.org

Division of Company P.O. DOV 0907 Tellaborate Florida 9991

Articles of Amendment Articles of Incorporation of

St. Paul's Episcopal	Church W	losley Char	pet, Inc.
(Name of Corporation as currently filed with the F	lorida Dept. of State)	, ,	•
N2100000023	24		
	t Number of Corporation	on (if known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida</i>	Not For Profit Corporation	on adopts the following
A. If amending name, enter the new name of the co	orporation:		
			The new
name must be distinguishable and contain the word "c "Company" or "Co," may not be used in the name.	corporation" or "incor	porated" or the abbreviat	ion "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>		
		<u> </u>	~ ~
D. If amending the registered agent and/or register new registered agent and/or the new registered		lorida, enter the name o	f the
 -			-77**
<u>Name of New Registered Agent</u> :			
— <u>New Registered Office Address</u> :		(Florida street address)	730
		Ľ1.	orida
	(City)		Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent:	accept the obligations of	the position.
 -	Signature of New	· Registered Agent, if chan	nging

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	V <u>Mil</u>	n Doe se Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>vr</u>	DR. Jeanette Rollins	9413 Toulon Blvd SEFFINER, FL 33584
Remove 2) Change Add	<u>vp</u>	Mr. Hugh J. Shannor	7,1V 18117 Pheasant Walk De Tampon FL 33647
X Remove	<u>T</u>	DR. Owen O, Roach	10341 Cobble Bliss Street Zephyrhais, EL 33541
4) Change Add	<u>.T</u> '	Ann-Marie Coombs	30030 SKylark Dalve Wosky Chapel, FL 33545
Remove 5) Change Add	5_	MRS. Susan Moshier	10553 Moshie Lane San Antonie, FL 33576
Remove δ) Change Add	<u>5</u> .	Mrs. Lynn Beer	4824 Wardening way
E. If amending or additional sheet		Articles, enter change(s) here: y). (Be specific)	

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		<u> </u>	•
		7.5-	
	•		
			•
		30	
The date of each amendment(s) adoption date this document was signed.	tion:	_, if other the	an the
Effective date if applicable:			_
	(no more than 90 days after amendment file date)		
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will not tment of State's records.	be listed as th	he
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were adop was/were sufficient for approval.	ted by the members and the number of votes cast for the amendment(s)		

Dated OS/10/2023

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)

Advicar

(Typed or printed name of person signing)

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