NA1000006728

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	#)
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COVER LETTER

TO: Amendment Section

Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION: Remant Family Church
DOCUMENT NUMBER: N 21000006728
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Anton La Grange (Name of Contage Person)
Name of Contact Person)
Remant Family Church (Firm/Company)
(Firm/Company)
10748 Versailles Blud
(Address)
Clermont, Florida, 34711 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Anton La Grange. at 225-916-5601 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(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:
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Certificate of Status Certified Copy Certificate of Status
(Additional copy is Certified Copy enclosed) (Additional Copy is
Enclosed)
Mailing Address Street Address
Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment

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Articles of Incorporation of

FILED

Kennout Family	Church	1 ne · 2022 MAR 10 PM 2: 29
(Name of Corporation as currently filed with the Florida De	pt. of State)	2022 HAY 10 PM 7: 59
N21000006728		SECRETARY OF STATE
(Document Number	of Corporation (if known)	MCLMIMSSEE, FL
Pursuant to the provisions of section 617,1006, Florida Statutes, amendment(s) to its Articles of Incorporation:	, this <i>Florida Not For Profit</i> (Corporation adopts the following
A. If amending name, enter the new name of the corporatio	n;	
N/A.		The new
name must be distinguishable and contain the word "corporatio" "Company" or "Co." may not be used in the name.	m" or "incorporated" or the	abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	1677 Hid	eaway Flot St
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Mascati	te.
	F1,3475	3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1677 Hid \$ Masco	eaway Flat st.
	F1, 34.75	-3.
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade		e name of the
Name of New Registered Agent:	١.	
New Registered Office Address:	(Florida stree	(address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A l hereby accept the appointment as registered agent. I am fami		ations of the position.
Sign	nature of New Registered Age	nt, 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 SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	SD	Nicholas Bermon	10748 Verscilles Bluel Germant
Remove 2) Change Add	_5_	Margan Parlow	Forida, 36711 33765 Retins rd Denham Springs
Remove 3) Remove	<u>T</u>	Caylynn Cutrer	La, 70706 53420 Old Meedwrd Folson La, 70437
4) Change Add	<u> </u>	Colette La Grenge	1677 Hideaway Fat &
Remove 5)ChangeAdd			Florida, 34753
Remove 6) Change Add			
		ticles, enter change(s) here:	
(attach additional she	vets, if necessary).	(Be specific)	

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The date of each amendment(s) ado date this document was signed.	ption:		, if other than 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 Department.	c does not meet the applicable sta artment of State's records.	tutory filing requirements, this	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were add was/were sufficient for approval.		nber of votes east for the amen	dment(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 02/02/2022
SignatureSignature
(By the charten 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)
Anton La Grange.
(Typed or printed name of person signing)
(Title of person signing)
(Tate of person eigenig)