## N'AI ()(((()())3675

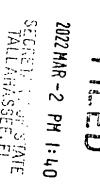
| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |

Office Use Only



100382736101

03/02/22--01010--001 \*\*35.00



of 3/10/2022

## **COVER LETTER**

TO: Amendment Section Division of Corporations

| CALVARY CI   | HAPEL CAPE CAT   | NAVERAL                      | INC.   |   |
|--|--|------------------------------|--|---|
| N21000013035   |  |                              |  |   |
| The enclosed Articles of Amendment and fee are so              | abmitted for filing.   |                              |  | _ |
| Please return all correspondence concerning this ma            | atter to the following:  |                              |  |   |
| SHANNON NIX  |  |                              |  |   |
|  | (Name of Contact P   | erson)                       | · · · · · · · · · · · · · · · · · · ·  | _ |
| CALVARY CHAPEL CAPE CANAVERA                                   | AL INC   |                              |  |   |
|  | (Firm/ Compan  | y)                           |  | _ |
| 8018 MAGNOLIA AVENUE   |  |                              |  |   |
|  | (Address)  |                              |  | - |
| CAPE CANAVERAL, FL 32920                                       |  |                              |  |   |
|  | (City/ State and Zip   | Code)                        |  | - |
| ADMINISTRATION@CAPECALVARY                                     | .COM   |                              |  |   |
| E-mail address: (to be us                                      | sed for future annual rep  | port notificati              | on)  | - |
| For further information concerning this matter, plea           | se call:   |                              |  |   |
| SHANNON NIX  | at   | 336                          | 343-2551   |   |
| (Name of Contact Perso   |  | (Area Code)                  | (Daytime Telephone Number)   | - |
| Enclosed is a check for the following amount made              | payable to the Florida   | Department o                 | f State:   |   |
| \$35 Filing Fee   []\$43.75 Filing Fee & Certificate of Status | : □\$43.75 Filing Fee<br>Certified Copy<br>(Additional copy i<br>enclosed) | Cert<br>s Cert<br>(Add       | 50 Filing Fee<br>ificate of Status<br>ified Copy<br>litional Copy is<br>losed) |   |
| Mailing Address Amendment Section                              | An   | reet Address<br>nendment Sec |  |   |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

2022 MAR -2 PM 1:40

## CALVARY CHAPEL CAPE CANAVERAL INC.

(Name of Corporation as currently filed with the Florida Dept. of State) N21000013035 (Document Number of Corporation (if known) Pursuant to the provisions of section 617,1006. Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation; N/A name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. 166 CENTER STREET B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) **SUITE 233** CAPE CANAVERAL, FL 32920 C. Enter new mailing address, if applicable: 166 CENTER STREET (Mailing address MAY BE A POST OFFICE BOX) SUITE 233 CAPE CANAVERAL, FL 32920 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: N/A \_, Florida \_\_\_\_ (Zip Code) (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 De           V         Mike Jo           SV         Sally Se | <u>ones</u>                                   |  |
|---|--|---|--|
| Type of Action<br>(Check One)                             | <u>Title</u>   | <u>Name</u>                                   | <u>Addres</u> s                                  |
| 1) Change<br>Add  | <u>D</u>   | LAZZARO DIMONDO                               | 8753 HONEYSUCKLE WAY CAPE CANAVERAL, FL 32920    |
| X Remove  |  |   |  |
| 2) Change Add   | <u>D</u>   | THOMAS J SHAW                                 | 1016 SPINNAKER WAY APT B2<br>MELBOURNE, FL 32935 |
| Remove Change X Add Remove                                | <u>S</u>   | SHANNON M. NIX                                | 8018 MAGNOLJA AVE<br>CAPE CANAVERAL, FL 32920    |
| 4) X Change Add   | DT   | BRIAN NIX                                     | 8018 MAGNOLIA AVE<br>CAPE CANAVERAL, FL 32920    |
| Remove  5) Change Add                                     |  |   |  |
| Remove 6) Change Add                                      |  |   |  |
| Remove  |  |   |  |
| E. <u>If amending or addir</u><br>(attach additional shee |  | icles, enter change(s) here:<br>(Be specific) |  |
| N/A   |  |   |  |
|   |  |   |  |
|   |  |   |  |
|   |  |   |  |
|   |  |   |  |

|  |  | <del></del>        |
|--|--|--------------------|
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  | ···                |
|  |  |                    |
|  |  |                    |
| <del></del>  |  | <del></del>        |
|  | 44-44-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-                                 |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
|  |  |                    |
| The date of each amendment(s) adoption date this document was signed.    | : 02/01/2022   | if other than the  |
| Effective date if applicable:  |  |                    |
| ()   | no more than 90 days after amendment file date)                          |                    |
|  | not meet the applicable statutory filing requirements, this date will no | t be listed as the |
|  |  |                    |
| Adoption of Amendment(s)   | (CHECK ONE)  |                    |
| ☐ The amendment(s) was/were adopted by was/were sufficient for approval. | by the members and the number of votes cast for the amendment(s)         |                    |

| Dated   | 02/27/2022   |
|---------|--|
| Signatu | (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) |
|         | BRIAN NIX  |
|         | (Typed or printed name of person signing)  |