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COVER LETTER

Department of State Amendment Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314



NOTE: Please provide the original and one copy of the document.

RESTATED ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S. (Not for Profit)

Chapel of the Woods Inc. ARTICLE 1 NAME The name of the corporation is:

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ARTICLE II RESTATEDARTICLES The text of the Restated Articles is as follows:	202
The text of the Residied Africies is as follows.	OCT TI
	28
	SSE S
Registered Agent: Judith Elain	e Eduards
154D SE CAUY	1ty Rd 357
Mayo, FL 32	2866
Officers:	
Virgilio Leyva, 719 SW Walter Henders AMBR Mayo, FL 32066	son Road
William H. Jones Jr. 1537 SE Co AMBR Mayo FL	unty Road 357 32066
Thomas W. Willingham, 11405 2274 Place, Live Oak, F AMBR	= L 32060

If amending the Officers and/or Directors, enter the title and name of each officer/director heing 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 РТ John Doe X Remove v Mike Jones <u>X</u> Add SV Sally Smith Address Type of Action Title Name (Check One) Kagistered uclith Flaine Edwards 1540 SEC. R.1357 1) <u>I</u> Change <u>320</u>da Add Regestered Remove fiver Rd. Eugene Hllen 2) ____ Change 32066 Add 1 Remove Judy F Allen AMBR 3) ____ Change _ Add Remove homas W. Willing ham AMBR 4) Change ile Add Remove 5) ____ Change 88 Add Remove œ 6) ____ Change _ Add Remove

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:

Address:

<u>Jaine Idwards</u> <u>SE County</u> Road 357 <u>1</u> 32066 udith

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Judith Stain Edwards	10/15/2024
Required Signature/Registered Agent	Dale

ARTICLE VI ARTICLE CONSOLIDATION

These adopted restated articles of incorporation supersede the original articles of incorporation and all amendments to them.

ARTICLE VII REQUIRED ADOPTION INFORMATION

Adoption of Amendment(s)

(CHECK ONE)

These restated articles of incorporation contain an amendment to the articles of incorporation	nin Timoratiu		uic h
required member approval. The date of adoption of the amendments was			and
the votes cast were sufficient for approval		28	5
These restated articles of incorporation were adopted by the board of directors.	10 10 10 10 10	ЫЧ	
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ARTICLE VIII EFFECTIVE DATE:

(OPTIONAL) Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.

Dated: 10/15/2024 Judith Signature:

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee or other court appointed fiduciary by that fiduciary)

Judith Elaine Edipards (Typed or printed name of person signing)

Fncorporator and Secretary (Title of person signing)

1024 OCT 28 PH 2: