

N230000007825

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

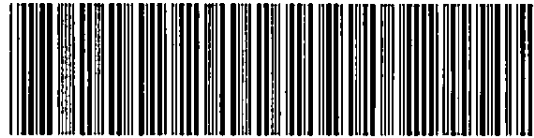
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Certified Copies _____

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08/14/23--01002--010 **43.75

FILED
RECEIVED
2023 AUG 14 AM 9:00
2023 AUG 14 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FL
DIRECTOR'S OFFICE
CORPORATIONS
TALLAHASSEE, FLORIDA

AUG 14 2023

COVER LETTER

Division of Corporations
Amendment Section

NAME OF CORPORATION: BridgeOver Christian Seminary inc

DOCUMENT NUMBER: N23000007825

enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lissa Stevens
(Name of Contact Person)

Bridgeover Christian Seminary inc
(Firm/ Company)

P.O. BOX 181104
(Address)

Tallahassee FL 32318
(City/ State and Zip Code)

Cuerarsi@yahoo.com
E-mail address: (to be used for future annual report notification)

Further information concerning this matter, please call:

Lissa Stevens at 850-445-5351
(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:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|--|--|--|--|

Mailing Address

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

Street Address

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

2023 AUG 14 AM 9:00

Bridgeover Christian Seminary Inc
Name of Corporation as currently filed with the Florida Dept. of State)

SECRETARY OF STATE
TALLAHASSEE, FL

N23000007325

(Document Number of Corporation (if known))

Under the provisions of section 617-1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation

If amending name, enter the new name of the corporation:

The new

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.

Enter new principal office address, if applicable:

Principal office address MUST BE A STREET ADDRESS

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO BOX 181104

Tallahassee FL 32318

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:

Florida

(City)

(Zip Code)

By Registered Agent's Signature, if changing Registered Agent:

I, by 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. E.g., 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:

Change	PT	John Doe
Remove	V	Mike Jones
Add	SV	Sally Smith

<u>Type of Action</u>	<u>Title</u>	<u>Name</u>	<u>Address</u>
(Check One)			

<input type="checkbox"/> Change	<u>owner/president</u>	<u>Lissa Stevens</u>	<u>3607 N Monroe St</u>
<input checked="" type="checkbox"/> Add			<u>Tallahassee FL 32303</u>
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary) (Be specific)

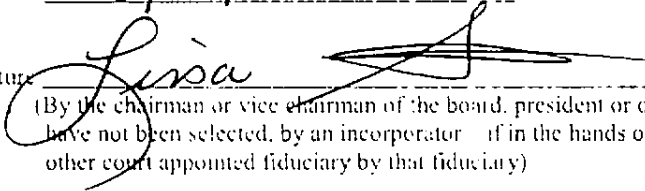
[illegible]

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Option of Amendment(s) **(CHECK ONE)**

✓ 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 8/14/23

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)

Lissa Stevens
(Typed or printed name of person signing)

President
(Title of person signing)