# Na500007a68

(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:  Sheve Backus is  aready listed as the  Registered agent

Office Use Only



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07/16/25--01040--006 +\*35.00





#### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form for filing *Articles of Amendment* to amend the articles of incorporation of a *Florida Not for Profit Corporation* pursuant to section 617.1006, Florida Statutes. This is a basic amendment form and may not satisfy all statutory requirements for amending.

A corporation can amend or add as many articles as necessary in one amendment.

- > The original incorporators cannot be amended.
- > If amending the name of the corporation, the new name must be distinguishable on the records of the Florida Department of State. A preliminary search for name availability can be made through the Division's website at www.sunbiz.org. You are responsible for any name infringement that may result from your corporate name selection.
- If amending the registered agent, the new agent must sign accepting the appointment and state that he/she is familiar with the obligations of the position.
- If amending/adding officers/directors, list titles and addresses for each officer/director.

If a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

The document must be typed or printed and must be legible.

Pursuant to section 617.0123, Florida Statutes, a delayed effective date may be specified but may not be later than the 90th day after the date on which the document is filed.

Filing Fee	\$35,00 (Includes a letter of acknowledgment)
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Certified Copy (optional) \$8.75

Certificate of Status (optional) \$8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

For further information, you may call the Amendment Section at (850) 245-6050

#### **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: New Life Fellowship Church	
DOCUMENT NUMBER: N25000007268	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Steve J. Backus	
(Name of Contact Person)	
New Life Fellowship Church	
(Firm/ Company)	
109 Dogwood Drive Loop (Address)	
Ocala, Florida, 34472	
(City/ State and Zip Code)	
sjbackus521@gmail.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Steve J. Backus atatat	
(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:	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee  Certificate of Status	

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee Tallahassee.

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

#### Articles of Amendment to Articles of Incorporation

of

FILED

New Life Fellowship Church		2025 1111
(Name of Corporation as currently filed with the Flor	ida Dont of State)	2025 JUL 16 AM 9:41
Name of Corporation as currently filed with the Fior	ida Dept. of State	STATE
N25000007268		
(Document N	umber of Corporation (if know	vn)
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For I	Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "cor "Company" or "Co," may not be used in the name.	poration" or "incorporated" (	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDR	<u>ESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registere new registered agent and/or the new registered of	d office address in Florida, e fice address:	nter the name of the
Name of New Registered Agent:		
<del></del>	(Flori	ida street address)
New Registered Office Address:		
		Florida
<del></del> -	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I d	ered Agent: am familiar with and accept the	e obligations of the position.
	Signature of New Registere	ed 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change x Add	<u> </u>	Steve J. Backus	109 Dogwood Drive Loop Ocala, FL. 34472
Remove			
2) Change Add		<u> </u>	
Remove 3) Change Add Remove			
4) ChangeAdd	<del></del>		
Remove			
5) Change	_		
Remove			
6) Change	_		
Remove			
E. If amending or addin additional sheets, if ne	ig additio cessary).	onal Articles, enter change(s) here: (attach (Be specific)	

•			
	 <u> </u>		<del>,</del>
	 <u> </u>	<del> </del>	<del></del>
	 		<del></del> -
	-		
	 		<del></del>
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	 	<del></del>	
		<u> </u>	
			<u>-</u>
	 	<del>_</del>	<del></del>
			<del></del> _
	 		<u>-</u>
			<del></del>
The date of each amendment(s) adoption: _	 		, if other than the
date this document was signed.			
Effective date if applicable:	 		

(no more than 90 days after amendment file date)

<u>Note:</u> 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.

Adoption of Amendm	ent(s) ( <u>CHECK ONE</u> )	
X The amendmen was/were sufficient		<b></b>
There are no mem adopted by the box	pers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	BALE.
Dated	9-17-2025	
have	Steve J. Backus  (By the chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	Steve J. Backus  (Typed or printed name of person signing)	<del></del>
	President	
	(Title of person signing)	



### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 3, 2025

STEVE J BACKUS

109 DOGWOOD DRIVE LOOP OCALA, FL 34472

SUBJECT: NEW LIFE FELLOWSHIP CHURCH INC.

Ref. Number: N25000007268

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):

Steve Backus is already listed as the registered agent.

If you have any further questions concerning your document, please call (850) 245-6050.

Letter Number: 825A00019659

Schelby Harrell
Regulatory Specialist II
Amendment Section

#### COVERLETTER

**TO:** Amendment Section Division of Corporations

SUBJECT: New Life Fellowship Church Inc.	
Name of Corporation	
DOCUMENT NUMBER: N25000007268	
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Steve J Backus	
Name of Contact Person	<del></del>
New Life Fellowship Church Inc.	
Firm/Company	<del></del>
109 Dogwood Drive Loop	
Address	
Ocala, Fl. 34472	
City/State and Zip Code	<del></del>
sjbackus521@gmail.com	
E-mail address: (to be used for future annual	Il report notification)
For further information concerning this matter, p	please call:
Steve J Backus	at ( 352 ) 713-8408 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

the Property of

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida ir to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: New Life Fellowship Church Inc.
2. The principal	office address: 109 Dogwood Drive Loop Ocata, Fl. 34472
3. The mailing a	address (if different): same
4. Date of incorp	poration/qualification: 06/14/2025 Document number: N25000007268
	I street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)
	was not listed in error
,	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office  Steve J Backus
	109 Dogwood Drive Loop
	P.O. Box NOT acceptable
	Ocala, Fl. 3-1472
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Hen	Steve J Backus Director/President  Printed or typed name and title
•	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address. I hereby confirm that the speen notified in writing of this change.
Stee	et Tto Kun July 9, 2025
·	half of an entity:
	yped or Printed Name

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)

\* \* \* FILING FEE: \$35.00 \* \* \*