N28997

	(Requestor's Name)	·
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	(Business Entity Name)	
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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: _	Lighthouse of Hope	Community Churc	h of Mascotte	e, FL, Inc	
N28	997				
DOCUMENT NUMBER:					
The enclosed Articles of Amendm	ent and fee are subm	itted for filing.			
Please return all correspondence c	oncerning this matter	to the following:			
Howard J Roszak					
		Name of Contact P	'erson)		
Lighthouse of Hope Community	Church				
		(Firm/ Compan	y)		
PO Box 98					
		(Address)			
Mascotte, FL 34753					
	(1	City/ State and Zip	Code)		
hjroszak@yahoo.com					
E-mail	address: (to be used f	or future annual re	port notificat	on)	·····
For further information concerning	this matter, please ca	all:			
Howard J. Roszak		at	352	516-0876	
(Nam	e of Contact Person)		(Area Code) (Daytime Telepho	ne Number)
Enclosed is a check for the follow	ng amount made paya	able to the Florida	Department of	f State:	
	43.75 Filing Fee & Certificate of Status	3\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Cer is Cer (Ad	.50 Filing Fee tificate of Status tified Copy ditional Copy is closed)	

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation of

Lighthouse of Hope Community Church of Mascotte, FL. Inc

(Name of Corporation as curren	tly filed with the Flor	rida Dept. of State)
N28997		
(Document Numb	per of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:	
Hillcrest Baptist Church of Mascotte, FL., Inc.		The new
name must be distinguishable and contain the word "corpord "Company" or "Co." may not be used in the name.	tion" or "incorporated	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
•		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
		<u> </u>
D. If amending the registered agent and/or registered offi	os address in Florida	autou the mana of the
new registered agent and/or the new registered office a		Letter the name of the
Name of New Registered Agent: N/A		
		lorida street address)
New Registered Office Address:		,
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		the obligations of the position.
	ignature of New Pegis	tered 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)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change		N/A	····	
Add				
Remove				
2) Change		N/A		
Add				
Remove				
3) Change		N/A		
Add				
Remove				
4) Change		N/A		
Add				
Remove				
5) Change		N/A		
Add				
Remove				
6) Change		N/A		
Add				
Remove				

		cis, y neces	suryj. (De	зресіјіс)	ge(s) here:					
Vice President's name should be correctly spelled as Adel J. Ramirez										
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
November 15, 2016 Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
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 November 15, 2016	
Signature All Mayer	_
(By the chairman of 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)	
Howard J. Roszak	
(Typed or printed name of person signing)	
President, Registered Agent	
(Title of person signing)	