N35209

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SECRETARY OF STATE
TALLAHASSEE, FLORID.

Amend

APR 0 6 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section **Division of Corporations**

Grace Brethren Church of Pinellas Park NAME OF CORPORATION:
N35209
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rendal Weekley
(Name of Contact Person)
Grace Brethren Church of Pinellas Park
(Firm/ Company)
630062nd Avenue North
(Address)
Pinellas Park, FL 33781
(City/ State and Zip Code)
Randy.Weekley@Verizon.net
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rendal Weekley 727 5462850
(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 Certificate of Status Certified Copy (Additional Copy is enclosed) \$35 Filing Fee Certificate of Status 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Grace Brethren Church of Pinellas Park, Inc				
(Name of Corporation	n as currer	ntly filed with the Florida D	ept. of State)	-
N35209				
(Docu	ment Numb	per of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statut	es, this <i>Florida Not For Prof</i>	It Corporation adop	ts the following
A. If amending name, enter the new name of th	e corporat	tion:		
N/A				The new
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nam		ition" or "incorporated" or t	he abbreviation "Co	
B. Enter new principal office address, if applicable:		N/A		
Principal office address <u>MUST BE A STREET A</u>	ADDRESS)		
			•	
C. Enter new mailing address, if applicable:		N/A		PSP SI
(Mailing address <u>MAY BE A POST OFFICE</u>	BOX)		<u> </u>	<u> </u>
				7 ×
				- 88 T
			,	
 If amending the registered agent and/or registered agent and/or the new register. 			the name of the	
new registeren agent and/or the new registe	N/A	audress:		
Name of New Registered Agent:				78-
New Registered Office Address		(Florida si	treet address)	
THE TAKE IN PACE THAT CONT	N/A			
		(City)	, Florida (Zip Cod	(a)
		(City)	(Zip Coa	<i>(E)</i>
New Registered Agent's Signature, if changing	Registered	l Agent:	ili a ca	•,.•
hereby accept the appointment as registered age	nt. 1 am fa	imular with and accept the ob	nigations of the posi	non.
		Signature of New Registered	Agent if changing	

Page 1 of 4

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>V</u> <u>Mi</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	Diane P Ferguson	3896 102nd Place
X Add			Clearwater, FL 33762
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding addition (attach additional sheets, if necessity)	ssary). ,(Be specific)			
/A				 .
		·		
	.			
W-10-10-10-10-10-10-10-10-10-10-10-10-10-				
				
			-	Party de a representation
A-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-				

)	MArch 29, 2017	
The date of each amendmen	ıt(s) adoption:	, if other than the
date this document was signed	<u>1</u> . · ,	
	March 29, 2017	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fite date)	
	his block does not meet the applicable statutory filing requirements, this date will not be the Department of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) pproval.	
There are no members of adopted by the board of	r members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated Marc	th 29, 2017	
Signature	Gendal Weekk	-
· •	e 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	
other	court appointed fiduciary by that fiduciary)	
Re	endal Weekley	
	(Typed or printed name of person signing)	
Di	irector	
-	(Title of person signing)	