

# N40817

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

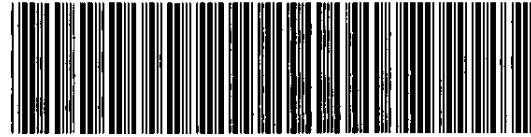
(Business Entity Name)

(Document Number)

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## 600207919626

05/26/11--01013--009 \*\*25.00

600207919626  
06/14/11--01008--001 \*\*10.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 JUN 13 PM 3:11

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*Amend*

*T. BROWN 6-14-11*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: CORNERSTONE CHRISTIAN CENTER INC

DOCUMENT NUMBER: N40817

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

Please return all correspondence concerning this matter to the following:

GEORGE FARAGI PRESIDENT  
(Name of Contact Person)

CORNERSTONE CHRISTIAN CENTER OF BOYNTON BEACH INC  
(Firm/ Company)

11443 W. PALMETTO PARK ROAD  
(Address)

BOCA RATON, FL 33428-2601  
(City/ State and Zip Code)

CORNERSTONEBOCA@AOL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

REV. GEORGE FARAGI at ( 561 ) 375-7952 or 364 7549  
(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 checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input 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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 3, 2011

CORNERSTONE CHRISTIAN CENTER OF BOYNTON BEACH, INC.  
REV. GEORGE FARAGI SR  
11443 W PALMETTO PARK RD  
BOCA RATON, FL 33428-2601

SUBJECT: CORNERSTONE CHRISTIAN CENTER OF BOYNTON BEACH,  
INC.

Ref. Number: N40817

We have received your document for CORNERSTONE CHRISTIAN CENTER OF BOYNTON BEACH, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown  
Regulatory Specialist II

Letter Number: 611A00013641

Articles of Amendment  
to  
Articles of Incorporation  
of

CORNERSTONE CHRISTIAN CENTER OF BOYNTON BEACH, INC.  
(Name of Corporation as currently filed with the Florida Dept. of State)

N 40817  
(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. 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.*

**B. Enter new principal office address, if applicable:**  
(Principal office address MUST BE A STREET ADDRESS)

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

**D. 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: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_ (Florida street address)

\_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*Signature of New Registered Agent, if changing*

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TALLAHASSEE, FLORIDA

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**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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Sec/TRES	MICHAEL HIGH	5759 NW 49 <sup>th</sup> DR CORAL SPRINGS, FL 33067	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
Sec/TRES	FRANKLIN LATCHMAN	2700 RIVERSIDE DR #206B CORAL SPRINGS, FL 33065	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

*(attach additional sheets, if necessary). (Be specific)*

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The date of each amendment(s) adoption: MAY 23, 2011  
(date of adoption is required)

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

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 MAY 23, 2011

Signature Rev. George Faragi  
(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)

REV. GEORGE FARAGI  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)