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Amend

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Carverstone Christian Conter of Boynton Beach Flori
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rev. George Farage (Name of Contact Person)
Coene stone Christian Center of Boynton Bruch FL INC.
9727 Son Pointe Dave
BoyNTON Boach FL 33437-3333 (City/ State and Zip Code)
910 froga acl. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rev George Foragi at 501 - 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:
\$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) ☐\$52.50 Filing Fee Certificate of Status (Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, Fl. 32303

Articles of Amendment to Articles of Incorporation of

Name of Corporation as currently filed with the Coric	o vega, or crear	
Document Nu	imber of Corporation (i	f known)
Pursuant to the provisions of section 617,1006, Florida Sta mendment(s) to its Articles of Incorporation:		
A. If amending name, enter the new name of the corpo	<u>ration:</u>	
		The new
name must be distinguishable and contain the word "corp Company" or "Co," may not be used in the name.	oration" or "incorpore	ated" or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable:		
Principal office address MUST BE A STREET ADDRE	<u>SS</u>)	202
Enter new mailing address, if applicable:		. · · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)	· · · · · ·	70
		· · · · · · · · · · · · · · · · · · ·
		
 If amending the registered agent and/or registered new registered agent and/or the new registered offi 	<u>office address in Flor</u> ce address	ida, enter the name of the
	et uduress.	
Name of New Registered Agent		
New Registered Office Address:		(Florida street address)
		(9)
	(City)	Florida (Zip Code)
	, ,	•
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. Lan	ered Agent: on familiar with and acc	cept the obligations of the position.
	Sionature of New Re	gistered 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		Doe Jones Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add	ST	VINCENT DI Marco	7147 Via Genova Delnay Back FL 33446
Remove 2) Change Add	<u>ST</u> _	Geraldoire Redmond	646/ NW 2Nd AND #206 BOKE POTTON FC 33487
Remove 3) Remove Add Remove			
4) Change Add			
Remove 5) Change Add Remove			
6) Change Add			
E. If amending or additional sh		Page 2 of 4 Articles, enter change(s) here: (Be specific)	

					
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	ı	Page 3 of 4			
The date of each amendment(s) adoption date this document was signed.	n:	Feb.	20,	20 20	, if other than
Effective date if applicable:					
	(no more than 90 da)	vs after amer	idment filo	e date)	
Note: If the date inserted in this block doe document's effective date on the Departme	s not meet the applic ent of State's records	able statutor	y tiling re	equirements, this d	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)				
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and	the number	of votes c	ast for the amendn	nent(s)

IJ	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 $\frac{2/26/20}{0}$
	(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 Farage (Typed or printed name of person signing)

(Title of person signing)