

N43722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

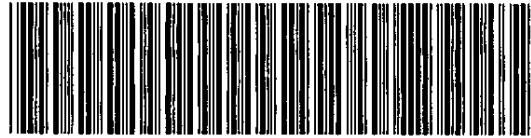
(Business Entity Name)

(Document Number)

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R. WHITE

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 JUL 22 PM 3:56

FILED

COVER LETTER

TO: Amendment Section
• Division of Corporations

NAME OF CORPORATION: Old Catholic Church OF The Americas, Inc.

DOCUMENT NUMBER: N43722

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

Please return all correspondence concerning this matter to the following:

Most Rev. Richard Sebastian Riccardi

(Name of Contact Person)

Old Catholic Church OF The Americas, Inc.

(Firm/ Company)

122 13th Avenue North

(Address)

Lake Worth, FL 33460-1702

(City/ State and Zip Code)

Bishop-Richard@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bishop Richard Sebastian Riccardi at (**561**) **767-6822**

(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 type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" 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

Articles of Amendment
to
Articles of Incorporation
of

FILED

JUL 22 PM 3:56

Old Catholic Church OF The Americas, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Name of Corporation as currently filed with the Florida Dept. of State)

(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:

Old Catholic Church Of New Utrecht, Inc.

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)

N/A

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:

N/A

(Florida street address)

New Registered Office Address:

(City)

, Florida

(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.

N/A

Signature of New Registered 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.

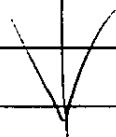
Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	_____	<u>M/A</u>	_____
<input type="checkbox"/> Add	_____	↓	_____
<input type="checkbox"/> Remove	_____		_____
2) <input type="checkbox"/> Change	_____		_____
<input type="checkbox"/> Add	_____		_____
<input type="checkbox"/> Remove	_____		_____
3) <input type="checkbox"/> Change	_____		_____
<input type="checkbox"/> Add	_____		_____
<input type="checkbox"/> Remove	_____		_____
4) <input type="checkbox"/> Change	_____		_____
<input type="checkbox"/> Add	_____		_____
<input type="checkbox"/> Remove	_____		_____
5) <input type="checkbox"/> Change	_____		_____
<input type="checkbox"/> Add	_____		_____
<input type="checkbox"/> Remove	_____		_____
6) <input type="checkbox"/> Change	_____		_____
<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)

N/A



The date of each amendment(s) adoption: JUNE 17, 2013, if other than the date this document was signed.

Effective date if applicable: JUNE 17, 2013
(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 June 17, 2013y

Signature 

(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)

Most Rev. Richard Sebastian Riccardi
(Typed or printed name of person signing)

M. Rev. Richard Sebastian Riccardi
(Title of person signing)

Articles of Amendment
to
Articles of Incorporation
of

FILED

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Old Catholic Church OF The Americas, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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*(Principal office address **MUST BE A STREET ADDRESS**)*

N/A

C. Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

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N/A

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

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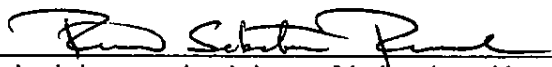
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Dated June 17, 2013y

Signature 
(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)

Most Rev. Richard Sebastian Riccardi,
(Typed or printed name of person signing)

M. Rev. R. Sebastian Riccardi,
(Title of person signing)

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(Attach additional sheets, if necessary)

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<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
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<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	_____	_____ <u>N/A</u>	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change	_____	_____	_____
<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)

N/A

Lined area for entering changes, with a vertical line and arrow pointing downwards.