# N46873

| (Requestor's Name)                      |  |  |  |  |
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| (Address)                               |  |  |  |  |
| (Address)                               |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
| (Document Number)                       |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 19, 2024

SUSY OLDHAM 4700 SW 188 AVE SOUTHWEST RANCHES, FL 33332

SUBJECT: CHRIST COVENANT CHURCH, INC.

Ref. Number: N46873

We have received your document for CHRIST COVENANT CHURCH, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida profit corporation, but your entity is a Florida not for profit corporation. Please complete and return the enclosed blank form(s).

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) 245-6050.

Morgan E Lovett Regulatory Specialist II

Letter Number: 524A00003626

#### **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPORATION: CHRIST COVENANT CHURCH INC.  |
|---|
| DOCUMENT NUMBER: N 46873  |
| The enclosed Articles of Amendment and fee are submitted for filing.  |
| Please return all correspondence concerning this matter to the following:   |
| SUSY DLD HAM (Name of Contact Person)   |
| CHRIST COVENANT CHURCH, INC.  |
| 4700 SW 188 AUE.  |
| SOUTHWEST RANCHES, FL 33332<br>(City/ State and Zip Code)   |
| CHRIST COVENANT FINANCE OG MAIL. COM E-mail address: (to be used for future annual report notification)   |
| For further information concerning this matter, please call:  |
| SUSY OLDHAM at (617) 747 – 0896.  (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  Certificate of Status  (Additional copy is enclosed)  □\$52.50 Filing Fee Certificate of Status  Certificate of Status  Certified Copy  (Additional Copy is Enclosed) |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee   |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to

and the second

### Articles of Incorporation

of

| CHRIST COUZNANT CHURCH, INC.   |
|--|
| (Name of Corporation as currently filed with the Florida Dept. of State) N 46 8 7 3  |
| (Document Number of Corporation (if known)   |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> 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 <u>MUST BE A STREET ADDRESS</u> )  |
|  |
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|  |
| C. Enter new mailing address, if applicable:   |
| (Mailing address MAY BE A POST OFFICE BOX)   |
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|  |
| 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: SUSY OLD HAM   |
| 4700 SW 188 AVE  |
| (Florida street address)   |
| New Registered Office Address:   |
| SOUTHWEST RANCHES, Florida 33332   |
| (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. |
| X. Sun a Million   |
| Spinature 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:  X/Change X/Remove X/Add                  | PT         John Do           V         Mike Jo           SV         Sally So | ones  |                 |
|--|--|---|-----------------|
| Type of Action (Check One)                         | <u>Title</u>   | Name  | <u>Addres</u> s |
| 1) Change Add                                      | <del></del>  |   |                 |
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| 2) Change Add                                      |  |   |                 |
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| 5) Change Add                                      |  | <del></del>                                   |                 |
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| 6) Change Add                                      |  |   |                 |
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| E. If amending or addir<br>(attach additional shee |  | icles, enter change(s) here:<br>(Be specific) |                 |
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| The date of each amendment(s) adoption:  | The date of each amendment(s) adoption: date this document was signed. |                            | if other than t |
| Effective date if applicable:  | Effective data if applicables  |                            |                 |
| Effective date if applicable:  (no more than 90 days after amendment file date)  | (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 be listed as the document's effective date on the Department of State's records. | Note: If the date inserted in this block does not meet the applica     |                            |                 |

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

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

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)

ROBERT BULLEN
(Typed or printed name of person signing)

DIRECTOR, ELDER, OFFICER
(Title of person signing)