## N50037

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROVED AND FILED

C. LEWIS

NOV 1 9 2013

EXAMINER

## **COVER LETTER**

Division of Corporations Shingle Creek United Methodist Church, Inc. NAME OF CORPORATION: N5003 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kimberly DuBreuil, Senior Pastor (Name of Contact Person) Shingle Creek United Methodist Church (Firm/ Company) 2420 Old Vineland Drive (Address) Kissimmee, FL 34746 (City/ State and Zip Code) kim.dubreuil@flumc.org E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kimberly DuBreuil (Name of Contact Person) 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 Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

**Mailing Address** 

TO: Amendment Section ...

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

AND FILED 13 NOV 14 PM 1:54 SECRETARY OF STATE TALLAHASSEE, FLORIDA

## Articles of Amendment to Articles of Incorporation of

Shingle Creek United		
(Name of Corporation as currently N50037	thed with the Florida Dept. of Sta	<u>te</u> )
	ment Number of Corporation (if know	wn)
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporati		of For Profit Corporation adopts the following
A. If amending name, enter the new nar	ne of the corporation:	
name must be distinguishable and contain "Company" or "Co." may not be used in		The new rated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if (Principal office address <u>MUST BE A ST</u>		
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		
D. If amending the registered agent and new registered agent and/or the new		rida, enter the name of the
Name of New Registered Agent:	Arlin Hilliard, Trustee C	hairperson
	2420 Old Vineland	Road
New Registered Office Address:	(Florida street addre	,
	Kissimmee (City)	, Florida 34746 (Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	anging Registered Agent:	ccept the obligations of the position.

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>Mik</u>	n <u>Doe</u> le Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	D	Deakle, Jennifer	4515 Declaration Drive
Add			Kissimmee, FL 34746
X Remove			
2) Change	D	Weyerbacher, Janie	4515 Declaration Drive
Add			Kissimmee, FL 34746
X Remove 3) X Change	T,TR	Cregger, Tom	999 Cherokee Drive
Add			Kissimmee, FL 34744
Remove			
4) Change	TR	Hilliard, Arlin	2447 West Roble Drive
X Add			Kissimmee, FL 34746
Remove			
5) Change	TR	Bracewell, Craig	1103 Gardanne Court
X Add			Kissimmee, FL 34759
Remove			
6) Change	TR	Knight, Debbie	317 Indian Point Circle
X Add			Kissimmee, FL 34746
Remove		Days 2 a 6 4	

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)	
	<del></del>	
	<del></del>	
		-
		<del></del>

The date of each amendment(s) adoption:

November 9, 2013

FILE other than the date this document was signed.

November 9, 2013

FILE other than the date this document was signed.

November 9, 2013

FILE other than the date this document was signed.

November 9, 2013

FILE other than the date this document was signed.

SECRETARY OF STATE TALLAHASSEE. FLORIDA

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.

November 9, 2013

November 9, 2013

(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

Craig Bracewell

Signature

(Typed or printed name of person signing)

Church Council Chairperson, Trustee

other court appointed fiduciary by that fiduciary)

(Title of person signing)