N92000000893

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SECRETARY OF STATE TALLAHASSEE, FL

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COVER LETTER

TO: Amendment Section
Division of Corporations

CORK UNITED METHODIST CHURCH NAME OF CORPORATION:
N92000000893 DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
RON BAILEY
(Name of Contact Person)
CORK METHODIST CHURCH, INC.
(Firm/ Company)
4815 WEST SAM ALLEN RD.
(Address)
PLANT CITY, FL 33565
(City/ State and Zip Code)
ghatmaker @cork methodist church . org
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
George Hat maker 434-5461747 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(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:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status Certificate of Status (Additional copy is enclosed) S52.50 Filing Fee & Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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FILED

CORK UNITED METHODIST CHURCH, INC.		
(Name of Corporation as currently filed with the Florida Dept. of State)	2021 JUH 18	AH 7: 59
N92000000893	SECRETARY	OF STATE
(Document Number of Corporation	(if knowh)ALLAHA!	SEE, FL
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Na</i> amendment(s) to its Articles of Incorporation:	ot For Profit Corporat	ion adopts the following
A. If amending name, enter the new name of the corporation:		
CORK METHODIST CHURCH, INC.		The new
name must be distinguishable and contain the word "corporation" or "incorpo "Company" or "Co." may not be used in the name.	rated" or the abbrevia	tion "Corp." or "Inc."
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 Flonew registered agent and/or the new registered office address:	rida, enter the name	<u>of the</u>
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
		lorida
(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 appointment as registered agent.	ccept the obligations o	the position.
Signature of New R	Registered Agent, if cha	nging

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: XChange X Remove X Add	<u>v</u>	<u>John Doe</u> <u>Mike Jones</u> <u>Sally Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add		 	
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or adding (attach additional sheet)	2 addition s, if necess	al Articles, enter change(s) here: sary). (Be specific)	
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The date of each amendment(s) addate this document was signed.	option:			, if other than the
Effective date if applicable:				
meetire date it appreadic.	(no more than 90 da	ays after amendment	file date)	
Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the appli	cable statutory filing		rill not be listed as the
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 5/25/2021
	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)
	RON BAILEY
	(Typed or printed name of person signing)
	TRUSTEE DIRECTOR
	(Title of person signing)

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