

N93000005260

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

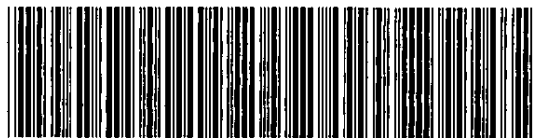
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 APR 10 PM 4:03

FILED

Roberts APR 10 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 23, 2009

ANTHONY DIAZ
THE LAW FIRM OF ANTHONY DIAZ
1211 ORANGE AVE STE 104
WINTER PARK, FL 32789

SUBJECT: THE ORLANDO CHURCH OF RELIGIOUS SCIENCE'S SPIRITUAL
CENTER OF THE INSTITUTE FOR CONSCIOUS LEADERSHIP, INC.
Ref. Number: N93000005260

We have received your document for THE ORLANDO CHURCH OF RELIGIOUS
SCIENCE'S SPIRITUAL CENTER OF THE INSTITUTE FOR CONSCIOUS
LEADERSHIP, 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):

Please indicate the name of your corporation in the space provided on the form.
Complete section E of your form.

The date of adoption of each amendment must be included in the document.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 009A00009746

RECEIVED
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2009 APR 10 AM 8:00

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COVER LETTER

TO: Amendment Section
Division of Corporations

THE ORLANDO CHAPTER FOR RELIGIOUS SCIENCE
NAME OF CORPORATION: SPIRITUAL Center for Conscious Leadership INC

DOCUMENT NUMBER: N93000005260

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

Please return all correspondence concerning this matter to the following:

Anthony Diaz
(Name of Contact Person)

The Law Firm of Anthony Diaz
(Firm/ Company)

1211 ORANGE Ave Suite 104
(Address)

Winter Park, FL 32789
(City/ State and Zip Code)

For further information concerning this matter, please call:

Anthony Diaz at (407) 774-4949
(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 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

The Orlando Church of Religious Science's SPIRITUAL Center of the
Institute of Conscious
Leadership, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

N93000005260

(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:

CENTRAL FLORIDA CENTER FOR SPIRITUAL LIVING 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)

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TALLAHASSEE, FLORIDA

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: _____

New Registered Office Address: _____ (Florida street address)

_____, Florida
(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.

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	_____	_____	<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)

Amended name of corporation to: Central Florida ~~INC~~ CENTER
FOR SPIRITUAL LIVING, INC ON 10/1/08

The date of each amendment(s) adoption: 3-16-09

Effective date if applicable: _____
(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 03 16 09

Signature Rev. John A. DePalma
(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. JOHN A. DePalma
(Typed or printed name of person signing)

President Board of Trustees
(Title of person signing)