

N94000005515

(Requestor's Name)

(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:

Office Use Only



100219084871

W12-4732

01/23/12--01027--003 **35.00

None Change
& Amend

FILED
2012 FEB 13 PM 3:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2/13/12

*00789, 01169, 00707, 00167, 00671
*00789, 00721, 01169, 00707, 00513, 00671



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 6, 2012

Helen M. Wall
Center For Spiritual Living Florida
6152-126 Avenue, Suite 501
Largo, FL 33773

SUBJECT: CENTER FOR CONSCIOUS LIVING CHURCH OF RELIGIOUS
SCIENCE, INC.
Ref. Number: N94000005515

We have received your document for CENTER FOR CONSCIOUS LIVING CHURCH OF RELIGIOUS SCIENCE, 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 document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

You failed to make the correction(s) requested in our previous letter.

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) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 612A00004776

RECEIVED

12 FEB 13 AM 9:39

FLORIDA DEPARTMENT OF STATE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 25, 2012

Helen M. Wall
Center for Spiritual Living Florida
6152-126 Avenue, Suite 501
Largo, FL 33773

SUBJECT: CENTER FOR CONSCIOUS LIVING CHURCH OF RELIGIOUS
SCIENCE, INC.
Ref. Number: N94000005515

We have received your document for CENTER FOR CONSCIOUS LIVING CHURCH OF RELIGIOUS SCIENCE, 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):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

new
The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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) 245-6907.

Annette Ramsey
Regulatory Specialist II

Letter Number: 612A00001933

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Center for Conscious Living Church of Religious Science, INC

DOCUMENT NUMBER: N94000005515

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

Please return all correspondence concerning this matter to the following:

Helen M. Wall

(Name of Contact Person)

Center for Conscious Living Church of Religious Science, INC

(Firm/ Company)

6152-126 Avenue Suite 501

(Address)

Largo, FL 33713

(City/ State and Zip Code)

cs1@CSLGulfcoast.org

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

For further information concerning this matter, please call:

Helen M Wall

(Name of Contact Person)

at (727) 538-0900

(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

FILED

2012 FEB 13 PM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Center for Conscious Living Church of Religious Science, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

N94000005515

(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:

Center for Spiritual Living Florida Gulfcoast, 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)

NA

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

NA

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: NA

(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.

NA

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:

☒ Change PT John Doe
☐ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Rev Martin Preston</u>	<u>8513 Shallow Ck. Ct</u> <u>New Port Richey</u> <u>FL 34653</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>Tommy Marsh</u>	<u>8961-Antigua Dr</u> <u>Largo</u> <u>FL 33777</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>Norma Roberts</u>	<u>2005 12 Ave So</u> <u>St. Petersburg</u> <u>FL 33712</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Cathy Baker</u>	<u>701 Maximo Ave</u> <u>Clearwater</u> <u>FL 33759</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>Jo Flower</u>	<u>1815 Cypress Trace</u> <u>Safety Harbor</u> <u>FL 34698</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>William White</u>	<u>34654 Orange Dr</u> <u>Pinellas Park</u> <u>FL 33781</u>

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

NA

The date of each amendment(s) adoption: November 20, 2011

Effective date if applicable: November 20, 2011
(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 1/19/2012

Signature Helen M. Wall
(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)

Helen M. Wall
(Typed or printed name of person signing)

President of Board of Trustees,
(Title of person signing)