

N95000003941

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

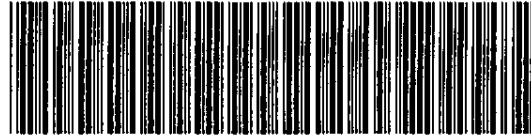
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900214887639

Amend

12/07/11--01019--010 **35.00

2011 DEC -7 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

DR

12/8/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: THE LIFE HOUSE CHILDREN'S HOME, INC.

DOCUMENT NUMBER: N95000003941

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

Please return all correspondence concerning this matter to the following:

DINA COMER

(Name of Contact Person)

CHRISTIAN LIFE FELLOWSHIP

(Firm/ Company)

1200 S.W. 20TH AVE

(Address)

CAPE CORAL, FL. 33991

(City/ State and Zip Code)

DINACOMER@CLFLIFE.COM

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

For further information concerning this matter, please call:

DINA COMER

(Name of Contact Person)

at

(239) 283 2299

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" 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

THE LIFE HOUSE CHILDREN'S HOME, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N95000003941

(Document Number of Corporation (if known))

2014 DEC -7 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

NO CHANGE

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)

1200 SW 20TH AVE

CAPE CORAL, FL. 33991

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1150 SW 20TH AVE

CAPE CORAL, FL 33991

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:

DINA COMER

1200 SW 20TH AVE

(Florida street address)

New Registered Office Address:

CAPE CORAL

(City)

Florida 33991

(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.

Dina Comer
Signature of New Registered Agent, if changing

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

<u>Title(s)</u>	<u>Name</u>	<u>Address</u>
1) <u>P</u>	<u>DINA COMER</u>	<u>2210 SW 23RD COURT</u> <u>CAPE CORAL, FL. 33991</u>
2) _____	_____	_____ _____ _____
3) _____	_____	_____ _____ _____
4) _____	_____	_____ _____ _____
5) _____	_____	_____ _____ _____
6) _____	_____	_____ _____ _____

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

<u>Title(s)</u>	<u>Name</u>	<u>Title(s)</u>	<u>Name</u>
1) <u>P</u>	<u>HOPSON, KIMBERLEY</u>	4) _____	_____
2) <u>SEC</u>	<u>ROBERTSON, CRYSTAL</u>	5) _____	_____
3) _____	_____	6) _____	_____

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

NONE

The date of each amendment(s) adoption: NOVEMBER 30, 2011

Effective date if applicable: DECEMBER 1, 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 Nov 30 2011

Signature Kim H

(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)

Kim Hopson
(Typed or printed name of person signing)

President
(Title of person signing)