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Office Use Only

COVER LETTER

TO: Amendment Section Division of Corporatio	ns			
NAME OF CORPORATION	ON: <u>Tuskawilla Church o</u>	t Christ		
DOCUMENT NUMBER:	<u>N96000000512</u>	<u> </u>		
The enclosed Articles of An	nendment and fee are sub	mitted for filing.		
Please return all correspond	ence concerning this matte	er to the following:		
Jimmy H. Wilson				
		(Name of Contact Per	son)	
Tuskawilla Church of Chris	1			
		(Firm/ Company)		
4610 Misty Way				
		(Address)		
Oviedo, FL 32765				
		(City/ State and Zip C	ode)	<u> </u>
tuskawillacofc@gmail.com				
 -	-mail address: (to be used	for future annual repo	ort notification	i)
For further information cond	erning this matter, please	call:		
Jimmy H. Wilson			(407) 416-75	96
	(Name of Contact Person) at	(Area Code)	(Daytime Telephone Number
Enclosed is a check for the f	ollowing amount made pa	ayable to the Florida D	epartment of	State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi) Filing Fee icate of Status ied Copy tional Copy is used)
Division c P.O. Box	nt Section f Corporations	Ame Divi The 241	et Address endment Secti sion of Corpe Centre of T 5 N. Monroc ahassee, FL 3	orations allahassee 2 Street, Suite 810

Articles of Amendment to Articles of Incorporation of

Tuskawilla Church of Christ

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

(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:

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. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)

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)

(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.

Signature of New Registered Agent, if changing

A

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 Doc 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>John E</u> <u>V Mike J</u> <u>SV Sally S</u>	ones	
<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change Add	<u>TR</u>	Jean Ann Weaver	611 Horseman Drive Oviedo, FL 32765
2) Change Add	<u></u>	Robin Cusimano	9431 Belmont Terrace Oviedo, FL 32765
Remove 3.) Change X Add	<u></u>	Mark Dawkins	204 Fallen Palm Drive Casselberry, FL 32707
4) Change Add			
Remove 5/ Change Add			
6) Remove 6) Change Add			
Remove			

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

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The date of each amendmen	(s) adoption:	, if other than the
date this document was signed		
Effective date <u>if applicable</u> :	August 15, 2022	
Encente date <u>n'applicatione</u> .		

(no more than 90 days after amendment file date)

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

- <u>}-</u> · · · ·
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

12/31/22 Dated

Signature <u>HUCLS</u> (By/ne 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)

Jimmy H. Welson (Typed or printed name of person signing)

TRUSTER

(Title of person signing)