## N9600001793

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		,
·		

Office Use Only



000288874200

08/17/16--01026--014 \*\*35.00

16 AUG 17 AM 8: 5:

AUG 26 2016 O MCNAIR

## **COVER LETTER**

TO: Amendment Section Division of Corporations

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

16 Alle 17 Et 8:55 Clearwater Chinese Christian Church NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Celina Chang (Name of Contact Person) (Firm/ Company) 103 Harbor Dr. (Address) Palm Harbor FL34683 (City/ State and Zip Code) celina103@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 727785-0915 Celina Chang (Daytime Telephone Number) (Name of Contact Person) (Area Code) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & **\$35** Filing Fee □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) **Mailing Address Street Address** Amendment Section Amendment Section

**Division of Corporations** 

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

## Articles of Amendment to Articles of Incorporation of

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

Clearwater Chinese Christian Church

A. If amending name, enter the new name of the corporation:		to the provisions of section 617.1 nt(s) to its Articles of Incorporati		Statutes, this F	lorida No	t For Profit	Corporatio	n adopts the	e following
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)  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)  New Registered Office Address:  (City)  (City)  New Registered Agent's Signature, if changing Registered Agent:	amendine	in(s) to its Articles of incorporati	on.					•	•
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)  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:  NA  Name of New Registered Agent:  NA  (Florida street address)  New Registered Office Address:  (City). (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	A. If am	ending name, enter the new nai	ne of the cor	poration:					•
"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)  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:  Name of New Registered Agent  (Florida street address)  New Registered Office Address:  (Florida (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	NA					3.2			The new
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 Florida, enter the name of the new registered agent and/or the new registered office address:  NA  Name of New Registered Agent:  NA  (Florida street address)  New Registered Office Address:  (City)  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:				rporation" or	"incorpor	ated" or th	e abbreviati	on "Corp."	or, "Inc."
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:  NA  Name of New Registered Agent:  NA  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	"Compan	iy" or "Co." may not be used in	the name	26.3		in the state of th	tyr i		
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:  NA  (Florida street address)  New Registered Office Address:  (City)  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	B. Enter	new principal office address, it	f applicable:	NA		•		775 I.	
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:  NA  Name of New Registered Agent:  NA  (Florida street address)  New Registered Office Address:  (City), (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:				RESS )					
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:  NA  Name of New Registered Agent:  NA  (Florida street address)  New Registered Office Address:  (City), (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:		,							
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:  NA  Name of New Registered Agent:  NA  (Florida street address)  New Registered Office Address:  (City), (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:		,							
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:  NA  Name of New Registered Agent:  NA  (Florida street address)  New Registered Office Address:  (City), (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:				Section 5					
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:  NA  Name of New Registered Agent:  NA  (Florida street address)  New Registered Office Address:  (City). (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:				NA			:		
new registered agent and/or the new registered office address:  NA  Name of New Registered Agent:  NA  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	(Mail	ing address <u>MAY BE A POST O</u>	FFICE BOX	() - , - 1 - 1 - 1	<u>. 135</u>	<u> </u>	• • • •	*	<del></del>
new registered agent and/or the new registered office address:  NA  Name of New Registered Agent:  NA  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:									
new registered agent and/or the new registered office address:  NA  Name of New Registered Agent:  NA  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:						,		;	
new registered agent and/or the new registered office address:  NA  Name of New Registered Agent:  NA  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:		-	î.	" · ····	•	•		·	·- <u>-</u>
new registered agent and/or the new registered office address:  NA  Name of New Registered Agent:  NA  (Florida street address)  New Registered Office Address:  (City)  (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	D Ifam	anding the registered agent and	Var ragistara	d office addr	ass in Flor	ida antar :	the name of	tha	
NA  Name of New Registered Agent:  (Florida street address)  New Registered Office Address:  (City), (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:						iua, ciitti	ine name of	the	
Name of New Registered Agent:  (Florida street address)  New Registered Office Address:  (City), (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:			· NA						,
New Registered Office Address: , Florida, City). (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:		Name of New Registered	Agent:					<u> </u>	· · ·
New Registered Office Address: , Florida, City). (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:				and the second			. • .		- A 314 3
(City). (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:	t.		· · · · · ·	Y.		(Florida str	eet address)	1 1 1	
(City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:		New Registered Office	<u>Address</u> :	<del>***</del>					<b>.</b>
(City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:		•	•				Flo	rida	
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.				(City	<i>)</i>	· <del></del>			
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.								•	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	New Reg	istered Agent's Signature, if ch	anging Regis	stered Agent:		1			;
	I hereby a	accept the appointment as registe	red agent. [I	am familiar w	nth and ac	cept the ob	ligations of	the position.	
						•	· · · ·	45.0	
				4.0		: .		<u> </u>	

If amending the Officers	and/or Directors	enter the t	itle and na	ime of e	ach office	er/director	being	removed	and title	, name,	and
address of each Officer at	nd/or Director be	ing 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: X Change X Remove X Add	PT John Doe Y Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u> <u>Address</u>	
1) X Change	SD Chen I-Min 385 Rosalind Ln. Oldsmar FL3467	7
Add		-
Remove		- , · .
2) Change 2 Add		- '. :
Remove	· · · · · · · · · · · · · · · · · · ·	-
3) Change Add Remove		
4) Change		_
Add		-
5) Change		-
Add		-
Remove  6) Change  Add		
Remove		

E. <u>If a</u>	mending or adding additional Articles, enter change(s) here: sch additional sheets, if necessary). (Be specific)
NA	
	·
<del></del>	

The date of each amendment(s) late this document was signed.	adoption:	_, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the I	block does not meet the applicable statutory filing requirements, this date will not Department of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(s) aval.	
There are no members or me adopted by the board of dire	mbers entitled to vote on the amendment(s). The amendment(s) was/were ctors.	
August 1 Dated	3 2016	
Signature	airman or vice chairman of the board, president or other officer-if directors	
have not	been selected, by ap incorporator – if in the hands of a receiver, trustee, or rt appointed fiduciary by that fiduciary)	
Celina	Chang	
	(Typed or printed name of person signing)	
Treas	urer .	
	(Title of person signing)	