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COVER LETTER

TO: Amendment Section
Division of Corporations

I

Parkviev NAME OF CORPORATION:	v Christian Center, Inc			
N960000063. DOCUMENT NUMBER:	54			
The enclosed Articles of Amendment and	fee are submitted for filing	g.		
Please return all correspondence concerni	ng this matter to the follow	ving:		
Ernestine Babrs				
	(Name of Cor	ntact Person)		
Parkview Christian Center, Inc				
	(Firm/ Co	ompany)		
3520 Baker Avenue				
	(Add	ress)		
Haines City, FL 33844				
	(City/ State ar	nd Zip Code)		
info@parkviewchristiancenter.org				
E-mail address	: (to be used for future ann	ual report notificat	ion)	
For further information concerning this ma	atter, please call:			
Ernestine Babers		863 at	422-9222	
(Name of Cor	ntact Person)) (Daytime Telephon	e Number)
Enclosed is a check for the following amo	unt made payable to the Fl	orida Department o	of State:	
	iling Fee & \$\Bigsquare\$ \$\\$43.75 \text{ Filing Fee & Certified Comparison (Additional enclosed)}	opy Cer copy is Cer (Ad	50 Filing Fee tificate of Status tified Copy ditional Copy is closed)	
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	S	Street Address Amendment Se Division of Col Clifton Buildin 2661 Executive	ction porations g	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Parkview Christian Center	
(Name of Corporation as currently	filed with the Florida Dept. of State)
N96000006354	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, amendment(s) to its Articles of Incorporation:	this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>ı:</u>
Parkview Christian Life Center, Inc.	The new
name must be distinguishable and contain the word "corporatio "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 new registered agent and/or the new registered office add	
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A. I hereby accept the appointment as registered agent. I am fami	liar with and accept the obligations of the fosition.
Sigi	nature of New Registered Agent, if changing
Po.	

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 <math>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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		· 	
Add			
Remove			
3) Change			•
Add			
Remove			
4) Change			
Add			
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5) Change			
Add			
Remove			
Character (
6) Change			
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If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)				
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	May 3, 2015	
The date of each amendment(s) adoptio	on:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Department	es not meet the applicable statutory filing requirements, this date will rent of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	
There are no members or members en adopted by the board of directors.	ntitled to vote on the amendment(s). The amendment(s) was/were	
5-22-15 Dated		
Signature <u>Emestin</u>	e Babero	
have not been sele	or vice chairman of the board, president or other officer-if directors ected, by an incorporator – if in the hands of a receiver, trustee, or nted fiduciary by that fiduciary)	
Ernestine Bab	ers	
	(Typed or printed name of person signing)	
Vice Director		
	(Title of person signing)	