

N97000001068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

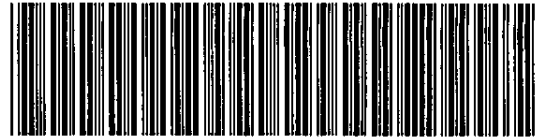
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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N/C
Amend

STATE OF NEW YORK
DEPARTMENT OF STATE
CLERK

17 JAN 17 PM 2:14

FILED

JAN 18 2017
D'CONNELL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 15, 2016

ANDREA ROWE
P.O. 721
TALLAHASSEE, FL 32302

SUBJECT: GENTLE SHEPHERD METROPOLITAN COMMUNITY CHURCH OF
TALLAHASSEE, INC.
Ref. Number: N97000001068

We have received your document for GENTLE SHEPHERD METROPOLITAN
COMMUNITY CHURCH OF TALLAHASSEE, 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):

A post office box is not an acceptable address for the registered agent.

If you have any questions concerning the filing of your document, please call
(850) 245-6838.

Cheryl R McNair
Regulatory Specialist II

Letter Number: 516A00026722

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Gentle Shepherd Metropolitan Community Church
of Tallahassee, Inc.

DOCUMENT NUMBER: N97000001068

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

Please return all correspondence concerning this matter to the following:

Andrea Rowe
(Name of Contact Person)

(Firm/ Company)

P.O. Box 721
(Address)

Tallahassee, FL 32302
(City/ State and Zip Code)

andmrowe@gmail.com
E-mail Address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrea Rowe at 850.980.5400
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

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

- \$35 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$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
17 JAN 17 PM 2:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

GENTLE SHEPHERD METROPOLITAN COMMUNITY CHURCH OF TALLAHASSEE, INC.

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

N97000001068

(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:

Thrive Metropolitan Community Church of Tallahassee, 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)

2720 Apalachee Pkwy # 10
Tallahassee, FL 32301-3636

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

No change

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:

Marcy MacDonell

1007 Cap Tram Rd.

(Florida street address)

New Registered Office Address:

Tallahassee
(City)

Florida 32317
(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.

Marcy MacDonell

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:

| | | |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u> |
| <input checked="" type="checkbox"/> Remove | <u>V</u> | <u>Mike Jones</u> |
| <input checked="" type="checkbox"/> Add | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|--|------------------------|---------------------------|---|
| 1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | <u>Moderator</u> | <u>Margaret D. Fisher</u> | _____ |
| 2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | <u>Member at Large</u> | <u>Martin Gill</u> | _____ |
| 3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>Member at Large</u> | <u>Christy Temples</u> | <u>740 Alice Wester Dr.</u> <u>Tallahassee, FL 32310</u> |
| 4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | _____ | _____ | _____ |
| 5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | _____ | _____ | _____ |
| 6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | _____ | _____ | _____ |

The date of each amendment(s) adoption: 12/7/2016, 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 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.
- 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 12/7/2016

Signature Andrew Rave

(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)

Andrew Rave
(Typed or printed name of person signing)

Clerk
(Title of person signing)