(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
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COVER LETTER

TO: Amendment Section
Division of Corporations

Friendship Community C NAME OF CORPORATION:	Church of South W	est Florida, In	с.
N97000005593 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted	d for filing.		
Please return all correspondence concerning this matter to	the following:		
Dr. Richard G. Schnieders			
(Na	me of Contact Per	rson)	
Friendship Grace Brethren Church, Inc.			
	(Firm/ Company)	<u> </u>	-
10251 Metro Pkway #116			
· · · · · · · · · · · · · · · · · · ·	(Address)	· · · · · · · · · · · · · · · · · · ·	
Fort Myers, FL 33966			
(City	y/ State and Zip C	code).	
DrRich@FriendshipGraceBrethren.com	•		. ,
E-mail address: (to be used for	future annual repo	ort notification)	
For further information concerning this matter, please call:			
Dr. richard Schnieders		236	267-7568
(Name of Contact Person)	at	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payable	e to the Florida D	epartment of S	tate:
(A	43.75 Filing Fee & ertified Copy Additional copy is nclosed)	Certific Certific	Filing Fee cate of Status and Copy conal Copy is ged)

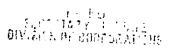
Mailing Address

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



Friendship Community Church of South West Florida, Inc.

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(Name of Corporation as cur)	antly flad with the Flan	ida Dant of Stata
N97000005593	entry med with the Fior	ida Dept. of State)
	mber of Corporation (if kr	nown)
Pursuant to the provisions of section 617.1006, Florida Statamendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ation:	
Friendship Grace Brethren Church, Inc.		The new
name must be distinguishable and contain the word "corpo" "Company" or "Co," may not be used in the name.	oration" or "incorporated	
B. Enter new principal office address, if applicable:	10251 Metro Pkway #	#116
(Principal office address <u>MUST BE A STREET ADDRES</u>	Fort Myers, FL 33966	5
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		enter the name of the
Name of New Registered Agent:		
	(Flo	orida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		the obligations of the position.
	Signature of New Regist	ered 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: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sm	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Ad d				
Remove				
4) Change		_		
Add		_	.	
Remove				
či. Ok				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
1744	

, r	· · · · · · · ·	May 24, 2015	
	ate of each amendment(s) ado	ption:	, if other than the
date th	is document was signed.		And the second
Effecti	May 2 ive date <u>if applicable</u> :	4, 2015	อเท่ารัก การตัวอาการสารได้กระ
		(no more than 90 days after amendment file date)	15 JUN -2 PM 2: 53
	If the date inserted in this blochent's effective date on the Department of the Depa	k does not meet the applicable statutory filing requirements, artment of State's records.	this date will not be listed as the
Adopt	ion of Amendment(s)	(<u>CHECK ONE</u>)	
	he amendment(s) was/were add as/were sufficient for approval	opted by the members and the number of votes cast for the ar	nendment(s)
	here are no members or member dopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) s.	was/were
	Dated <u>5-26</u>	-2015	
	Signature <u>Un</u> V	2, links 5,0	
	have not beer	nan or vice chairman of the board, president or other officer- n selected, by an incorporator – if in the hands of a receiver, opointed fiduciary by that fiduciary)	
	Dr. Richar	rd G. Schnieders	
		(Typed or printed name of person signing)	
	President A	/ Pastor	
		(Title of person signing)	