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## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 18, 2020

AARON LATHROP 220 JOHN KNOX RD STE 3 TALLAHASSEE, FL 32303

SUBJECT: SONSHIP CHRISTIAN FELLOWSHIP, INC.

Ref. Number: N98000002317

We have received your document for SONSHIP CHRISTIAN FELLOWSHIP, 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):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

\*\*PLEASE ONLY CHECK ONE BOX

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II Supervisor

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Letter Number: 920A00010008

## **COVER LETTER**

TO: Amendment Section Division of Corporations SONSHIP CHRISTIAN FELLOWSHIP, INC. NAME OF CORPORATION: N9800000217 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: AARON LATHROP (Name of Contact Person) SONSHIP CHRISTIAN FELLOWSHIP, INC. (Firm/ Company) 220 JOHN KNOX RD, SUITE 3 (Address) TALLAHASSEE, FL 32303 (City/ State and Zip Code) SONSHIPCHRISTIANFELLOWSHIP@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: AARON LATHROP 508-7674 850 (Name of Contact Person) (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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is

**Mailing Address** 

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Enclosed)

## Articles of Amendment Articles of Incorporation of

	of	2.50
SONSHIP CHRISTIAN FELLOWSHIP, INC.		10 p. 9-46
Name of Corporation as currently filed with the Florid	a Dept. of State)	<del>, 5.46</del>
N98000002317		
(Document Nur	nber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Statemendment(s) to its Articles of Incorporation:	tutes, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:	
		The new
name must be distinguishable and contain the word "corpo "Comnany" or "Co." may not be used in the name.	ration" or "incorporated	l" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>SS</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 of new registered agent and/or the new registered office		, enter the name of the
Name of New Registered Agent:		
		lorida 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
in and the management of the m	min and accept	on vougations 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	PT         John Do           V         Mike Jo           SV         Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change Add	<u>TD</u>	NEAL, WILLIAM HJR	P.O. BOX 181088 TALLAHASSEE, FL 32318
x Remove			
2) Change Add	SD	NEAL, CHARLOTTE	P.O. BOX 181088 TALLAHASSEE, FL 32318
x Remove 3) Change x Add Remove	D	GOODWIN, JUSTIN R.	2906 ABBOTSFORD WAY TALLAHASSEE, FL 32312
4) Change Add	<u>D</u>	GOODWIN, NATALIE F.	2906 ABBOTSFORD WAY TALLAHASSEE, FL 32312
Remove			
5) Change Add			
Remove			
6) Change Add	<del></del>		
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	,
	<del></del> ,		<u> </u>

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· <u></u>	
The date of each amendment(s) adoption: 5/1/2020 date this document was signed.	, if other than the
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file a	late)
Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	airements, this date will not be listed as the

Adoption of Amendment(s) (CHECK ONE)

Dated 4-30-2020
Signature Suns Lillia
(By the chairman or vice enairman 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)
KURT W. TELLERS
(Typed or printed name of person signing)
Tresident
(Title of person signing)

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