

| (Requestor's Name) | | | | |
|--------------------|--|--|--|--|
| _ | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| _ | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



500250072905

07/25/13--01004--004 **35.00

JUL 29 2013

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Cafe on t | he Rock Mir | nistries, Inc. |
|--|--|--|
| DOCUMENT NUMBER: N9900004 | 190 | |
| The enclosed Articles of Amendment and fee are subr | nitted for filing. | |
| Please return all correspondence concerning this matte | er to the following: | |
| Gina Sollars | | |
| | (Name of Contact Person |) |
| Friends of the Riverfront | , Inc. | |
| | (Firm/ Company) | |
| 723 NW 30th Avenue | | |
| | (Address) | |
| Ocala, FL 34475 | | |
| | (City/ State and Zip Code | e) |
| a1bailbonds@yah | | notification) |
| For further information concerning this matter, please | call: | |
| Gina Sollars | 352 | 732-2808 |
| (Name of Contact Person) | (Area Co | ode & Daytime Telephone Number) |
| Enclosed is a check for the following amount made pa | yable to the Florida Depa | rtment of State: |
| ■ \$35 Filing Fee | □\$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 | Amend Divisio Clifton 2661 E | Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301 |

Articles of Amendment to Articles of Incorporation

FILED

搁 JUL 25 AH 11:42

Cafe on the Rock Ministries, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) N9900004190

SECRETARY OF STATES

(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:

| Friends of the Riverfront, | | The |
|--|---|-----------------------------------|
| name must be distinguishable and contain "Company" or "Co." may not be used in t | the word "corporation" or "incorporated" of the name. | r the abbreviation "Corp." or "It |
| B. Enter new principal office address, if (Principal office address MUST BE A ST) | | |
| C. Enter new mailing address, if applications (Mailing address MAY BE A POST O | | · |
| The state of the s | | |
| D. If amending the registered agent and new registered agent and/or the new | l/or registered office address in Florida, en registered office address: | er the name of the |
| | | |
| Name of New Registered Agent: | | |
| Name of New Registered Agent: New Registered Office Address: | (Florida street address) | |
| - | (Florida street address) (City) | , Florida |
| Name of New Registered Agent: | | |

Page 1 of 4

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: \underline{X} Change \underline{X} Remove \underline{X} Add | <u>PT</u> <u>V</u> <u>SV</u> | John Doe Mike Jones Sally Smith | |
|--|------------------------------------|---------------------------------------|-----------------|
| Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| Change Add | | | |
| Remove 2) Change | | | |
| Add | | | |
| 3) Change | | | |
| Remove | | | |
| 4) Change Add | | | |
| Remove | | | |
| 5) Change Add | | | |
| Remove | | | |
| 6) Change Add | | | |
| Remove | | | |

| If amending or adding additional Arti (attach additional sheets, if necessary). | (Be specific) | | |
|--|---------------------------------------|---------------------------------------|----------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | <u>.</u> | | |
| | | | |
| | | | |
| | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | |
| | | | |
| | | | <u> </u> |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| | this document was signed. | ЮП: | , if other than th |
|------|--|---|--------------------|
| Effe | ctive date <u>if applicable;</u> | | |
| | | (no more than 90 days after amendment file date) | _ |
| Ada | ption of Amendment(s) | (<u>CHECK ONE</u>) | |
| | The amendment(s) was/were adopte was/were sufficient for approval. | ed by the members and the number of votes cast for the amendment(s) | |
| 8 | There are no members or members adopted by the board of directors. | entitled to vote on the amendment(s). The amendment(s) was/were | |
| | Dated July 22, 2 | 2013 | |
| | Signature | 2 Sollars | |
| | have not been se | or vice chairman of the board, president or other officer-if directors elected, by an incorporator – if in the hands of a receiver, trustee, or binted fiduciary by that fiduciary) | |
| | Gina W Solla | ars | |
| | (Ty | ped or printed name of person signing) | |
| | Secretary | | |
| | | (Title of person signing) | |