

N99000004325

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

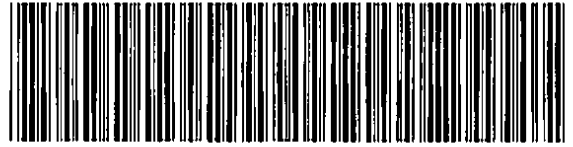
(Document Number)

Certified Copies _____

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Office Use Only



100410882451

Amend

FILED
2023 JUN 26 AM 11:40
STATE OF ARIZONA
DEPARTMENT OF REVENUE

A. RAMSEY
JUN 27 2023

2023 JUN 26 PM 1:45
STATE OF ARIZONA
DEPARTMENT OF REVENUE

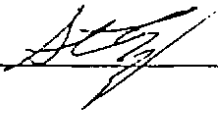
CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

NEW LIFE MINISTRIES OF ORLANDO INC

Please Debit FCA000000003 For: 35

Thank you Seth Neeley



Signature

Requested by: SETH

06/23/2023

Name

Date

Time

Walk-In

Will Pick Up

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ___ Cert. Copy _____
- ___ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____
- ___ Courier _____

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: NEW LIFE MINISTRIES OF ORLANDO, INC

DOCUMENT NUMBER: N99000004325

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

Please return all correspondence concerning this matter to the following:

VAN JOHNSON

(Name of Contact Person)

NEW LIFE MINISTRIES OF ORLANDO, INC.

(Firm/ Company)

111 NORTH ORANGE AVENUE, STE 800-342

(Address)

ORLANDO, FLORIDA 32801

(City/ State and Zip Code)

NEWLIFECOGIC3311@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VAN JOHNSON

(Name of Contact Person)

305

at

877-7964

(Area Code)

(Daytime Telephone Number)

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

- | | | | |
|------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

FILED

2023 JUN 26 AM 11:40

NEW LIFE MINISTRIES OF ORLANDO, INC.

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

N99000004325

(Document Number of Corporation (if known))

SECRETARY OF STATE
301 WEST FLORIDA

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:

N/A

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)

3311 NORTH POWERS DRIVE

ORLANDO, FLORIDA 32818

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

111 NORTH ORANGE AVENUE

SUITE 800-342

ORLANDO, FL 32801

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:

MAURICE ROBINSON

111 NORTH ORANGE AVENUE, STE 800-342

(Florida street address)

New Registered Office Address:

ORLANDO

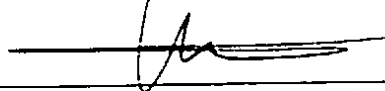
(City)

Florida 32801

(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.



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 checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>DERRICK W. HUTCHINS II</u>	<u>111 N ORANGE AVE</u> <u>SUITE 800-342</u> <u>ORLANDO, FL 32801</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>VAN JOHNSON</u>	<u>111 N ORANGE AVE</u> <u>SUITE 800-342</u> <u>ORLANDO, FL 32801</u>
3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>GREGORY ATKINSON</u>	<u>111 N ORANGE AVE</u> <u>SUITE 800-342</u> <u>ORLANDO, FL 32801</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Asst. S</u>	<u>JASCINTH BROCKINGTON</u>	<u>111 N ORANGE AVE</u> <u>SUITE 800-342</u> <u>ORLANDO, FL 32801</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>RICHARD JONES</u>	<u>111 N ORANGE AVE</u> <u>SUITE 800-342</u> <u>ORLANDO, FL 32801</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>MARCUS BARTON</u>	<u>111 N ORANGE AVE</u> <u>SUITE 800-342</u> <u>ORLANDO, FL 32801</u>

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

ADD - DIRECTOR - ANNE SMITH - 111 N ORANGE AVE, SUITE 800-342, ORLANDO FL 32801

CHANGE - DIRECTOR - KEITH GRAYSON - 111 N ORANGE AVE, SUITE 800-342, ORLANDO FL 32801

ADD - DIRECTOR - LEON D. WILLIAMS - 111 N ORANGE AVE, SUITE 800-342, ORLANDO FL 32801

REMOVE - REG AGENT - DENNIS HUTCHINS, SR - 1746 E SILVER STAR RD, STE 340, OCOEE, FL 34761

REMOVE - SENIOR PASTOR - DENNIS HUTCHINS SR, - 1746 E SILVER STAR RD, STE 340, OCOEE, FL 34761

REMOVE - BROTHER - ABRAHAM ENESSI - 1746 E SILVER STAR RD, STE 340, OCOEE, FL 34761

REMOVE - DEACON - MARLON MOYE-MOORE - 1746 E SILVER STAR RD, STE 340, OCOEE, FL 34761

REMOVE - ELDER - GREGORY MASSEY - 1746 E SILVER STAR RD, STE 340, OCOEE, FL 34761

REMOVE - SECRETARY - TANGELA THOMAS - 1746 E SILVER STAR RD, STE 340, OCOEE, FL 34761

REMOVE - SISTER - RACHEL BOND - 1746 E SILVER STAR RD, STE 340, OCOEE, FL 34761

The date of each amendment(s) adoption: JUNE 15, 2023, if other than the date this document was signed.

Effective date if applicable: JUNE 15, 2023
(no more than 90 days after amendment file date)

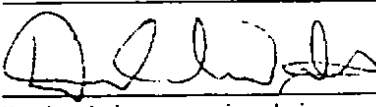
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 JUNE 15, 2023

Signature 

(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)

DERRICK W HUTCHINS II

(Typed or printed name of person signing)

PRESIDENT & SENIOR PASTOR

(Title of person signing)