705919

(Requestor's Name)
•
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filing Officer.
<u>.</u>
gare.

Office Use Only



000209361000

06/27/11--01028--014 **43.75



C.COULLIETTE

JUL 1 2 2011

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPO	RATION <i>LAFTER TABERT</i>	nacle Christian methodist	Episcopal Church, In
	~	59/9	
The enclosed Articles	s of Amendment and fee are s	ubmitted for filing.	
Please return all corre	espondence concerning this m	atter to the following:	
	Ruth S.	SeHks of Contact Person)	
	(Name	of Contact Person)	
<u>Car</u>	ter Tabernade Chris (Fi	rm/Company)	Church, Inc.
_/	South Cottage	4.11 Rd (Address)	·
	Orlando, Flas	r <i>i da 32805</i> State and Zip Code)	
		Tabernacle (m E. org sed for future annual report notifica	ation)
For further information	on concerning this matter, ple	ase call:	
Dr. Vaness	see J. Burns of Contact Person)	at (<u>407</u>) <u>29.5-</u> (Area Code & Daytir	4931_ne Telephone Number)
Enclosed is a check f	For the following amount made	e payable to the Florida Department	t 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)
	ing Address ndment Section	Street Address Amendment Section	,
	sion of Cornorations	Division of Corporation	ons

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301



RECEIVED

11 JUL -7 AM ID: 54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 28, 2011

RUTH S. SETTLES CARTER TABERNACLE CHRISTIAN METHODIST 1 SOUTH COTTAGE HILL RD ORLANDO, FL 32805

SUBJECT: CARTER TABERNACLE CHRISTIAN METHODIST EPISCOPAL

CHURCH, INC.

Ref. Number: 705919

We have received your document for CARTER TABERNACLE CHRISTIAN METHODIST EPISCOPAL CHURCH, INC. and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to submit the first page of the amendment form with your documents we received. You will need to locate the missing page or download application again and get the correct form and resumbit the completed full application to my attention. You must also have a title for the people you are adding as offices other than "O", that is not considered a title. You must choose Pres., VP, Sec, Treas. or assistant to one of those as a title for your officers.

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) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 311A00015502

COVER LETTER

TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPO	RATION: Arter Tabers	nacle Christian methodist &	o's copal Church, In
DOCUMENT NUM	7.	5919	·
The enclosed <i>Articles</i>	of Amendment and fee are s	ubmitted for filing.	
Please return all corre	espondence concerning this m	atter to the following:	
	Ruth 5.	Se Hks of Contact Person)	
Car	<i>fer TAbernace Chris</i> (Fi	stian Methodist Episcopal C rm/Company)	thurch, Inc.
_/	South Cottage	Address)	
	Orlando, Flando, (City/S)	<i>r i da 33805</i> tate and Zip Code)	
	CT & Carter, E-mail address: (to be u	Inbernacle (m E. org sed for future annual report notification	on)
For further information	on concerning this matter, plea	ase call:	
Dr. Vaness (Name	ee J. Burns of Contact Person)	at (<u>407</u>) <u>295- 4</u> (Area Code & Daytime	931 Telephone Number)
Enclosed is a check f	or the following amount made	e payable to the Florida Department of	f 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)
Amer Divis	ing Address ndment Section ion of Corporations Box 6327	Street Address Amendment Section Division of Corporations Clifton Building	·

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

Carter TAbernacle G	hristian Met	Hodist Episcopal	Church, Inc.	
(Name of Corporation as cur	rently filed with th	e Florida Dept. of St	ate)	
700	5/9			
(Document Nu	ımber of Corporatio	on (if known)		
Pursuant to the provisions of section 617.1000 the following amendment(s) to its Articles of		this <i>Florida Not For F</i>	Profit Corporation	adopts
A. If amending name, enter the new name	of the corporation	<u>:</u>		
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company"			corporated" or the	
dobreviation Corp. or 1nc. Company	or Co. may not t	ge usea in the name.		e ve vend e e
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>		NA		TELEVIE
			<u></u>	
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OFF		NA		TOP STAIL
				₽ ^[7]
D. If amending the registered agent and/or	registered office a	ıddress in Florida, en	ter the name of th	ı <u>e</u>
new registered agent and/or the new re-				_
Name of New Registered Agent:		14		
		• • •		
New Registered Office Address:	(Floria	la street address)	·	
			Florida	
		(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if chang	ging Registered Ag	rent:		
I hereby accept the appointment as register		amiliar with and acce	pt the obligations	of the
position.		1/1		
_	Signature of Nove	Registered Agent, if ch	anaina	
	Signature of New 1	zegistereu Agent, ij chi	ungmg	

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
Ď	Fritz Goode Cheryl Wynn	2577 Stoneview Rd Orlando, Fl 32806	Add Remove
	Cheryl Wynn	3219 Gulfstram Ad Orlando, Fl 32805	_ ☑ Add _ ☐ Remove
			_
	nding or adding additional Articles, en additional sheets, if necessary). (Be s		
		/ \ / / /	
	•		
	,		

The date of each amendment(s) adoption: 6 /9 /20//
(date of gdortion is required) Effective date if applicable: 0 9 20
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (<u>CHECK ONE</u>)
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
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, of other court appointed fiduciary by that fiduciary)
Dr. Vanessee J. Burns (Typed or printed name of person signing)
President/Director
(Title of person signing)

Page 3 of 3