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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: New Jerus	alem First Wissionary Ba	ptist Church, Inc.
DOCUMENT NU	UMBER:N02408		
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
		chael K. Anderson	
	N	ame of Contact Person	
	New Jerusalem Baptis	st First Missionary Baptist Chu Firm/ Company	urch, Inc.
		Time Company	
	22	54 Douglas Street Address	
		wood, Florida 33020	
	C	ity/ State and Zip Code	
	NJCHURC E-mail address: (to be use	CH2254@AOL.COM d for future annual report notification)	
For further inform	ation concerning this matter,	please call:	
Mic	chael K. Anderson	at (954)	922-6098
Name	e of Contact Person	Area Code & Daytime To	elephone Number
Enclosed is a chec	k for the following amount m	nade payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
	e, FL 32314	2661 Executive Center Circ Tallahassee, FL 32301	cle

Articles of Amendment

Articles of Incorporation (Name of Corporation as currently filed with the Florida Dept. of State) N02408 (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:

A. If amending name, enter the new name of the corporation	i N∕A
The new name must be distinguishable and contain the word 'abbreviation "Corp." or "Inc." "Company" or "Co." may not be	corporation" or "incorporated" or the be used in the name.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office additional agent. Name of New Registered Agent:	ress:
Now Registered Office Address (Florid	N 74 AVE Ta street address) PIN'ES, Florida 3302 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am for position.	ent: amiliar with and accept the obligations of t
· \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Registered Agent, if changing

Page 1 of 3

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>	Name	Address	Type of Action
PZ	JAKE Mccray	742 SW 4th st Dania Becich	☐ Add ☑ Remove
PD	Michael K. Anderson	FL 3300+ 1905 NW 74 AVC PEMBROKE PINES FL 33024	✓ Add ☐ Remove
	·		☐ Add ☐ Remove
(attach addi	g or adding additional Articles, enter of tional sheets, if necessary). (Be specific SE Change Ar Annie O Bas	-	ley

The date of each amendment(s) adoptio	n: OCTOBER 5, 2010 (date of adoption is required)
Effective date <u>if applicable</u> :	(date of adoption is required)
	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted l was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)
There are no members or members en adopted by the board of directors.	titled to vote on the amendment(s). The amendment(s) was/were
Dated_OCTOBE	R 5, 2010
Signature	
have not been	an or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, o ointed fiduciary by that fiduciary)
	Annie O Baskin (Typed or printed name of person signing)
Q	mi O. Baskin
	(Title of person signing)