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RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATION

Amen - N. C

**C.COULLIETTE** 

AUG 12 2009

**EXAMINER** 

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Negls	Temple Holin	ess Church	
DOCUMENT NUM	BER: <u>NO90</u>	00001653		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	J.B.	SoneS f Contact Person)		
	(Name o	f Contact Person)		
	(Fir	m/ Company)		
		(Address)		
	·	(Audivis)		
	(City/ St	ate and Zip Code)		
	E-mail address: (to be us	ed for future annual report notifi	cation)	
For further information	on concerning this matter, plea	se call:		
		at ()_ (Area Code & Dayt		
(Name	of Contact Person)	(Area Code & Dayt	ime Telephone Number)	
Enclosed is a check for	or the following amount made	payable to the Florida Departme	nt of State:	
	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)	
Mailing Address Amendment Section		Street Address Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
Tallahassee, FL 32314		2661 Executive Cent	2661 Executive Center Circle Tallahassee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

Neals lemp	le Mi	nistries	Inc	
(Name of Corporation as cu	rrently filed with	the Florida Dept.	of State)	
<u> </u>	1653		<u></u>	
(Document N	umber of Corpora	tion (if known)		
Pursuant to the provisions of section 617.100 the following amendment(s) to its Articles of		s, this <i>Florida Not i</i>	For Profit Corporation adopts	ı
A. If amending name, enter the new name	of the corporation	on:		
Neals Temple	toliness	Church	Inc	
The new name must be distinguishable and				
abbreviation "Corp." or " Inc." <u>"Company</u>	<u>" or "Co," may ne</u>	n ve usea in ine na	<u>me</u> .	
B. Enter new principal office address, if a (Principal office address MUST BE A STR.)				
			TAL S	
		<del></del>	—————————————————————————————————————	,
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF			HAS	7
(Matting duaress MAT BE A POST OF	FICE BUX		SEX N	
				1
				J
D. If amending the registered agent and/c	r registered offic	e address in Florid	a, enter the name of the	•
new registered agent and/or the new re	egistered office ac	ldress:		
Name of New Registered Agent:	-			
New Registered Office Address:	(Flo	rida street address)		
			, Florida	
	<del></del>	(City)	(Zip Code)	
New Registered Agent's Signature, if char	ging Registered .	Agent:		
I hereby accept the appointment as registe position.	red agent. I am	familiar with and	accept the obligations of the	!
-	Signature of New	w Registered Agent,	if changing	
	Digital are of 110	, mognition on meeting	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

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
<u>D</u>	Rich, Clarence Jr	166 Endoline DR Leesburg GA 317	_ □ Add _ ☑ Remove 43
D	Bettye Bryant	83 Hopkins Lane Greensborn F1 32330	<b>Ď</b> Add
			_
			- Memove
	ding or adding additional Articles, enter additional sheets, if necessary). (Be spec		
(anach a	uanionai sneeis, ij necessary). (De spec	ijic)	
	-		
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	- 12 - 14 - 14 - 14 - 14 - 14 - 14 - 14		<u>.</u>
		····	<u></u>

The date of each a	imendment(s) adoption: 8-11-2009
Effective date if a	oplicable: 8 - 12 - 2009
<del></del>	(no more than 90 days after amendment file date)
Adoption of Amer	ndment(s) (CHECK ONE)
	t(s) was/were adopted by the members and the number of votes cast for the amendment(s) ient for approval.
• •	nembers or members entitled to vote on the amendment(s). The amendment(s) was/were board of directors.
I	Dated 8-12-2009
5	Signature B. Ones
	(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)
	J. B. Jones
	(Typed or printed name of person signing)
	Deacon Director
	(Title of person signing)