104023

| (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: |
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May 13, 2019

CAPITAL CONNECTION, INC. 417 E. VIRGINIA STREET STE. 1 TALLAHASSEE, FL 32301

SUBJECT: ST. LUKE MISSIONARY BAPTIST CHURCH, INC. OF MIAMI

Ref. Number: 704623

We have received your document for ST. LUKE MISSIONARY BAPTIST CHURCH, INC. OF MIAMI and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 819A00009558

CAPITAL CONNECTION, INC.

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

| ST. LUKE MIS | SIONARY BAPTI | ST | |
|--------------------|---------------|-------------|--------------------------------|
| CHURCH, INC | . OF MIAMI | | |
| | | | 7 |
| | | | - |
| | | | |
| | | | Art of Inc. File |
| | <u> </u> | | 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 |
| | | | Рhото Сору |
| | | | Certificate of Good Standing |
| | | | Certificate of Status |
| | | | Certificate of Fictitious Name |
| | | | Corp Record Search |
| | | | Officer Search |
| | | | Fictitious Search |
| Signature | | | Fictitious Owner Search |
| J | | | Vehicle Search |
| | · | | Driving Record |
| Requested by: SETI | Н | | UCC 1 or 3 File |
| Name | Date | Time | UCC II Search |
| | | | UCC 11 Retrieval |
| Walk-In | Will Pick Up | | Courier |
| | | | • |

COVER LETTER

TO: Amendment Section Division of Corporations

| ST. LUKE MISSIC | NARY BAPTIST CHU | RCH, INC. OF MIAMI |
|--|---|--|
| DOCUMENT NUMBER: 704623 | | |
| The enclosed Articles of Amendment and fee are sub | mitted for filing. | |
| Please return all correspondence concerning this matt | er to the following: | |
| KATHY WHITE | | |
| | (Name of Contact Person | 1) |
| ST. LUKE BAPTIST CH | URCH | |
| | (Firm/ Company) | |
| 12040 N.W. 22ND PLAC | CE | |
| | (Address) | |
| MIAMI, FL 33167 | | |
| | (City/ State and Zip Code | 2) |
| JENKINSPASTO | \sim | |
| For further information concerning this matter, please | , | Contention, |
| WOODROW JENKINS | 305 | 608-4629 |
| (Name of Contact Person) | | ode & Daytime Telephone Number) |
| Enclosed is a check for the following amount made pa | ayable 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) | □\$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 Cliffon 2661 E | Address ment Section n of Corporations Building xecutive Center Circle (55cc, FL 32301) |

Articles of Amendment to Articles of Incorporation of

ST. LUKE MISSIONARY BAPTIST CHURCH, INC. OF MIAMI

| (Name of Corporation as currently filed with the Florida Dept, of State) | |
|---|------------------|
| 704623 | |
| (Document Number of Corporation (if known) | |
| Pursuant to the provisions of section 617,1006, Florida Statutes, this Florida Not For Profit Corporation adopts the folloamendment(s) to its Articles of Incorporation: | owing |
| A. If amending name, enter the new name of the corporation: | |
| N/A | |
| name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "tempany" or "Co." may not be used in the name. | e new Inc." |
| B. Enter new principal office address, if applicable: | |
| (Principal office address MUST BE A STREET ADDRESS) | 75 |
| | 15 |
| <u> </u> | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A | 13 81 9:08 |
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| | 08 |
| 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. N/A | |
| | |
| New Registered Office Address: | |
| | · ··· |
| (City) (Zip Code) | |
| New Registered Agent's Signature, if changing Registered Agent: Thereby 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: <u>X</u> Change | <u>PT</u> | John Doc | |
|-------------------------------|-------------|-------------|---|
| X Remove | <u>V</u> | Mike Jones | |
| \underline{X} Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| 1) Change Add | CS | ALMA ROSS | 1790 NW 551H STREET MIAMI, FLORIDA 33142 |
| X Remove | | | |
| 2) Change Add Remove | CS | KATHY WHITE | 12048 MW 22ND PLACE MIAMI, FL 33167 |
| 3) Change Add | | | |
| Remove 1) Change Add Remove | | | |
| 5) Change Add Remove | | | |
| 6) Change Add Remove | | | |

| F. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) N/A | |
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| The date | e of each amendment(s) adoption: 5/10/2019 |
|-----------|--|
| iffective | e date if applicable: |
| | (no more than 90 days after amendment file date) |
| Sdoptio | n of Amendment(s) (CHECK ONE) |
| | e amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) s/were sufficient for approval. |
| | ore are no members or members entitled to vote on the amendment(s). The amendment(s) was/were opted by the board of directors. |
| | Dated 5/10/2019 |
| | Signature Woodwo Colent for |
| | (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) |
| | WOODROW C. JENKINS JR. |
| | (Typed or printed name of person signing) |
| | PASTOR |
| | (Title of person signing) |