725627

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SHILOH BAPT	TIST CHURCH OF JACKSONVILLE, FLORIDA
DOCUMENT NUMBER: 7250	527
The enclosed Articles of Amendment and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	natter to the following:
KECIA MU	
. ()	Name of Contact Person)
SHILOH BAPTIST C	HURCH OF JACKSONVILLE, FLORIDA
	(Firm/ Company)
1118 V	WEST BEAVER STREET
	(Address)
J.A	ACKSONVILLE, FL 32204
· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code)
E mail addraga. (6a ha ii	KMURRAY@SMBCJAX.COM sed for future annual report notification)
E-man address: (to be u	sed for future annual report notification)
For further information concerning this matter, ple	ase call:
KECIA MURRAY	at (904) 899-1899 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Stat	& 🗆 \$43.75 Filing Fee & 🖂 \$52.50 Filing Fee us Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section	Street Address Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	CHURCH OF JACKSONVILLE, F			
. (Name of Corporation as	currently filed with the Florida E	ept. of State)	
	725627			
(Document Number	r of Corporation (if known)			
Pursuant to the provisions of section 617.1006, Flo following amendment(s) to its Articles of Incorpor		Profit Corpo	ration adopts the	
A. If amending name, enter the new name of th	e corporation:			
The new name must be distinguishable and contain "Corp." or "Inc." "Company" or "Co." may not		porated" or t	he abbreviation	
B. Enter new principal office address, if applica			 	
(Principal office address <u>MUST BE A STREET A</u>	(ADDRESS)			
				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	ROX)			
(Muning address MAT DE / 11 OBT OF TIEE	<u></u>			
		·····		
D. If amending the registered agent and/or reg		nter the nan		9
new registered agent and/or the new register	red office address:		1 DEC 27 PM 3:	NSIC SECT
Name of New Registered Agent:			EC :	が出
			2	F CO
New Registered Office Address:	(Florida street address)		PA	RPO
		101 4 -	ယှ	RAI
_ 	(City)	, Florida _	(Zip Code)	Sks
Name Desistance Assemble Signature if changing	Dogistared Agents			
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		ne obligations	of the position.	
Signature of	New Registered Agent, if changing			

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	<u>Name</u>		Address
1) <u>C</u>	JESSIE L. PINKNEY, JR.		10311 TRIPLE CROWN AVENUE JACKSONVILLE, FL 32257
2) <u>VC</u>	EUGENE DILLARD		8483 COUNTRY CREEK BOULEVARD JACKSONVILLE, FL 32221
3) <u>T</u>	MARCO A. TURNER	_	7982 WEST CONCORD BOULEVARD JACKSONVILLE, FL 32208
4) AT	DERRICK L. BRYANT	_	12495 ARROWLEAF LANE JACKSONVILLE, FL 32225
5) <u>S</u>	ARTHUR COX, JR.	_	3853 VICTORIA LAKES DRIVE JACKSONVILLE, FL 32226
6)	MAE R. MERRIWEATHER		2839 SELAWICK LANE JACKSONVILLE, FL 32218
If REMOVIN	G an officer and/or director, please list the	title(s) and	d name of the officer/director to be removed:
Title(s)	Name	Title(s)	<u>Name</u>
1) <u>C</u>	WILLIE L. DAVIS	4)	
2)	LARRY RICHARDSON	5)	
20			

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

Title(s)	•	<u>Name</u>		Address	
1-)		CAROLYN MUSE		1000 BROWARD ROAD	
				APARTMENT #1604	
				JACKSONVILLE, FL 32226	
2)		VERMELL P. SMITH		5615 SHADY PINE STREET SOUTH	
				JACKSONVILLE, FL 32244	
3)		WEST WILSON		1687 E. FALL CREEK DRIVE	
				JACKSONVILLE, FL 32222	
4)					
5)					
3)					
6)					
If REMOVIN	G an office	er and/or director, please list t	the title(s) and	I name of the officer/director to be removed	<u>l:</u>
Title(s)	<u>Name</u>		Title(s)	<u>Name</u>	
1)			4)		
			4)		
2)			5)		
3)			6)		

If amending or adding a attach additional sheets,	if necessary).	(Be speci	fic)			
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The date of each amendment(s) adoption: 12/05/2011
Effective date if applicable: 01/01/2012
(no more than 90 days after amendment file date)
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 $\frac{12-14-2016}{24}$
(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)
Willie L. Davis
(Typed or printed name of person signing)
Chairman
(Title of person signing)

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