736892

(Requestor's Name)
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(City/State/Zip/Phone #)
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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: ACNON BOSTIST DOCUMENT NUMBER: 736892 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Bracewell
(Name of Contact Person) stown Hwi For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed) Enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

Aenon Bastist Churc	h of tallaha	ssee Florida, In
(Name of Corporation as currently	y filed with the Florida Dept, of S	tate)
736892		
	of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, amendment(s) to its Articles of Incorporation:	this Florida Not For Profit Corpo	ration adopts the following
A. If amending name, enter the new name of the corporation	n:	
name must be distinguishable and contain the word "corporation" (Company" or "Co." may not be used in the name.	on" or "incorporated" or the abbre	The new viation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		10 HO TO
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		FILED 1:37
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	address in Florida, enter the nar dress:	ne of the
Name of New Registered Agent:	.	
New Registered Office Address:	(Florida sireet addr.	ess)
	(City)	, Florida
New Registered Agent's Signature, if changing Registered Albereby accept the appointment as registered agent. I am fam		 x of the position.
Six	anature of New Registered Agent, if	changing

Page 1 of 4

P = President; V = Vice P	rector title by the fil President; T= Treas = Chief Financial O	Ifficer. If an officer/director holds more	Trustee: C = Chairman or Clerk; CEO = Chief than one title list the first letter of each office
	ves the corporation	, Sally Smith is named the V and $S.$ Thes	he PST and Mike Jones is listed as the V. There is se should be noted as John Doe, PT as a Change.
Example: X Change X Remove X Add	PT John Do V Mike Jou SV Sally Sn	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove	Ofc.	Dorothy H. Nicol	0 2606 Hartsfield Rd Jallahassee, FL 32303
2) Change Add			
Remove 3) Change Add			
Remove 4) Change			
Add			
5) Change Add			
Remove			
6) Change Add			
Remarks			

Page 2 of 4

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:

If amending or adding additional Articles, enter cha attach additional sheets, if necessary). (Be specific)			1	
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The date of each amendment(s) adoption:	if other than the
late this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	<u> </u>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes east for the ar- was/were sufficient for approval.	nendment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) adopted by the board of directors.	was/were
Dated	
Signature (By the chairman or vice chairman of the board, president or other officer-	if Almony
have not been selected, by an incorporator – if in the hands of a receiver, other court appointed fiduciary by that fiduciary)	
Ruth Bracewell (Typed or printed name of person signing)	
Haent (Title of person signing)	

September, 2017

I would like to request that my Name, Dorothy II. Nicolo be Memored as a trustee for Genox Baptist Church effective impoliately. Thank you

Dorocky H. Nicola