(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
, , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special instructions to mining officer.





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COVER LETTER

TO: Amendment Section
Division of Corporations

FIRST BAPTIST NAME OF CORPORATION:	CHURCH OF BRANFORD INC
743376 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	
Please return all correspondence concerning this n	natter to the following:
FRANKIE ALLEN	
	(Name of Contact Person)
FIRST BAPTIST CHURCH OF BRANFORD IN	CC C
	(Firm/ Company)
607 SUWANNEE AVENUE P.O. BOX	3 853
	(Address)
BRANFORD, FLORIDA 32008	
	(City/ State and Zip Code)
SECRETARY@FBCBRANFORD.COM	
E-mail address: (to be	ised for future annual report notification)
For further information concerning this matter, ple	ase call:
MICHELLE ADERHOLT	386-935-1363 at
(Name of Contact Per	· · · · · · · · · · · · · · · · · · ·
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	the Cartified Copy (Additional copy is enclosed) S\$52.50 Filing Fee Certificate of Status 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

FILED

2018 Atto 20

	Articles of Incorpora	ation	2010 per 29 PM 2: 26	5
The First	- Bastist	- Ch	SECURIORS	ingi
(Name of Corporation	as currently lited with	the Florida	a Dept. of State)	
(Danner)	ent Number of Corporat	tion (if know		
(Docum	ent Number of Corporat	tion (it kno	wii)	
Pursuant to the provisions of section 617.1006, Flor mendment(s) to its Articles of Incorporation:	ida Statutes, this Florido	a Not For F	Profit Corporation adopts the fol	llowing
. If amending name, enter the new name of the	corporation:			
				he new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	"corporation" or "inco	orporated"	or the abbreviation "Corp." or	"Inc."
3. Enter new principal office address, if applical	ble:			
Principal office address MUST BE A STREET A	<u></u>			<u> </u>
		. <u></u>	<u> </u>	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE I	<u> </u>			
 If amending the registered agent and/or registered agent and/or the new registered. 	itered office address in	Florida, e	nter the name of the	
new registered agent and/or the new register	ed office address.			
Name of New Registered Agent:				
New Registered Office Address:		(Flor	ida street address)	
New Registered Office vital cas.				
	(City)	_	, Florida (Zip Code)	
	(Cny)		(Zip Code)	
New Registered Agent's Signature, if changing F	Registered Agent:	اندنان الراري	- Allantiano africa ancitias	
hereby accept the appointment as registered agen	t. I am familiar with ar	na accept ti	ne obugations of the position.	
<u>-</u>				
	Signature of N	'ew Register	red Agent, if changing	
	Signature of the	111 110810101		

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: X Change X Remove X Add	<u>V</u> <u>Mil</u>	n <u>Doe</u> ke <u>Jones</u> l <u>y Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PRES.	MATTHEW TYRE	P.O. BOX 431
Add			BRANFORD, FLORIDA 32008
X Remove			
2) X Change	PRES.	FRANKIE ALLEN	P.O. BOX 788
Add			BRANFORD, FLORIDA 32008
Remove		DA VID DERINGER	7160 300TH ST
3) Change X Add		BIVID DEMINOEN	BRANFORD, FLORIDA 32008
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u>:</u>	
Add			
Remove			

. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)							
								
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	-							
		. <u> </u>		<u> </u>				
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The date of each amendment(s) ad-	option:	, if other than the
late this document was signed.	• 1	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not partment of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s).	
There are no members or members adopted by the board of directors	pers entitled to vote on the amendment(s). The amendment(s) was/were ers.	
Dated	1/18	
Signature	Krankie Oll	_
have not bee	man or vice chairman of the board, president or other officer-if directors on selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
	IE ALLEN	
	(Typed or printed name of person signing)	
PRESID	ENT	
	(Title of person signing)	