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S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LAGISTON	20Ad BAPTIST Church of PensacolA, INC
DOCUMENT NUMBER: 749/92	
The enclosed Articles of Amendment and fee are subm	nitted for filing.
Please return all correspondence concerning this matter	r to the following:
Thomas M. JONES	(Name of Contact Person)
LAWTEN ROAD BAPTIS	(Firm/ Company)
1845 LAWTON ST.	
	(Address)
PENSACOLA, IFL. 3251	4
	(City/ State and Zip Code)
LATONICS 8 428 B) GM D11 Co E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please of	
Thomas N. JONES	850 1101 Buch
(Name of Contact Person)	at 850 - 476 - 9 2158 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pay	
\$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	Street Address

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

(Name of Corporation as curre	1UVCh OF PONSACALA, INC ently filed with the Florida Dept. of State)	<u></u>
(Document Num	nber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:		s the following
A. If amending name, enter the new name of the corpora	ation:	
LAWTON STREET BAPT'ST Churs name must be distinguishable and contain the word "corpor "Company" or "Co," may not be used in the name.	ration" or "incorporated" or the abbreviation "Co	The new rp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	7845 LAWDU ST,	
	S) PCNSACOLA, 71. 325.	14
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7845 LAWTON ST.	7. 19
	PLNSACOIA, 71. 30514	
		<u> </u>
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		E 100
Name of New Registered Agent:	/X/A	22 RIUG
New Registered Office Address:	(Florida street address)	, , , , , , , , , , , , , , , , , , ,
, Florida		
	(City), Florida, Florida, Zip Code	<i>(</i>)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am J		tion.
	WA Signature of New Registered Agent, if changing	
	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; CE() = 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		Doe Jones Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		W/A	
Add			
Remove			
2) Change		MA	
Add			
Remove			***
3) Change	<u>.</u>	MA	
Add			
Remove			
4) Change		W/A	
Add			
Remove			
5) Change		MA	
Add			
Remove			
6) Change		w/13	
Add		•	
Remove			

E. If amending or adding additional (attach additional sheets, if necessar	ry). (Be specific)	
	W/R	
	7.7	
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The date of each amendment(s) additional this document was signed.	option: KIA	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc locument's effective date on the Dep	ck does not meet the applicable statutory filing requirement artment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adways/were sufficient for approval	opted by the members and the number of votes cast for the	ne amendment(s)
There are no members or membadopted by the board of director	ers entitled to vote on the amendment(s). The amendments.	nt(s) was/were
Dated 1-1-3	1019	
Signature Thu	ms 4. Jonio.	
(By the chaiπ	nan or vice chairingn of the board, president or other offi	
	n selected, by an incorporator – if in the hands of a recei- ppointed fiduciary by that fiduciary)	ver, trustee, or
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
TI	HOMAS N. JONES	
	(Typed or printed name of person signing)	
ブ	Ruster / Incasor Thensu	rov
	(Title of person signing)	