

749888

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2015 DEC 28 PM 4:32  
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**COVER LETTER**

TQ: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Temple of Prayer Assembly God, Inc. of Jacksonville, Florida

DOCUMENT NUMBER: 749888

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Migdalia Cuevas

(Name of Contact Person)

n/a

(Firm/ Company)

8500 Wagenhals Rd

(Address)

Jacksonville FL 32210

(City/ State and Zip Code)

migmedsan1965@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Migdalia Cuevas

904

418-1307

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |                                          |                                                                        |                                                                                                     |                                                                                                                                       |
|------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|

**Mailing Address**

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

**Street Address**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 4, 2015

MIGDALIA CUEVAS  
8500 WAGENHALS RD  
JACKSONVILLE, FL 32210

SUBJECT: TEMPLE OF PRAYER ASSEMBLY OF GOD, INC. OF  
JACKSONVILLE, FLORIDA  
Ref. Number: 749888

We have received your document for TEMPLE OF PRAYER ASSEMBLY OF GOD, INC. OF JACKSONVILLE, FLORIDA and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Bylaws are not filed with this office. Please retain them for your records.

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.

Carol Mustain  
Regulatory Specialist II

Letter Number: 115A00025449

Articles of Amendment  
to  
Articles of Incorporation  
of

Temple of Prayer Assembly of God, Inc. of Jacksonville, Fl.

(Name of Corporation as currently filed with the Florida Dept. of State)

749888

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

Temple of Prayer of Jacksonville, Fl, Inc.

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**

n/a

*(Principal office address MUST BE A STREET ADDRESS)*

**C. Enter new mailing address, if applicable:**

n/a

*(Mailing address MAY BE A POST OFFICE BOX)*

**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

n/a

*New Registered Office Address:*

*(Florida street address)*

\_\_\_\_\_, Florida

*(City)*

*(Zip Code)*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>P</u>	<u>Gabriel Cuevas SR</u>	<u>1385 Delmar St</u>
<input type="checkbox"/> Add			<u>Jacksonville FL 32205</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>P</u>	<u>Rafael Cuevas</u>	<u>8500 Wagenhals Rd</u>
<input checked="" type="checkbox"/> Add			<u>Jacksonville FL 32210</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>VP</u>	<u>Noemi Gonzalez</u>	<u>1385 Delmar St</u>
<input type="checkbox"/> Add			<u>Jacksonville FL 32205</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>VP</u>	<u>Silvia Cruz-Lopez</u>	<u>711 Luna St</u>
<input checked="" type="checkbox"/> Add			<u>Jacksonville FL 32205</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	<u>V</u>	<u>Minerva Nieves</u>	<u>1385 Delmar St</u>
<input type="checkbox"/> Add			<u>Jacksonville FL 32205</u>
<input checked="" type="checkbox"/> Remove			
6) <input type="checkbox"/> Change	<u>At Large</u>	<u>Carmen Echevarria</u>	<u>6728 Chester Park Cr.</u>
<input checked="" type="checkbox"/> Add			<u>Jacksonville FL 32222</u>
<input type="checkbox"/> Remove			

**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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>V</u>	<u>Socorro Penaranda</u>	<u>1385 Delmar St</u>
<input type="checkbox"/> Add			<u>Jacksonville Fl 32205</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

(attach additional sheets, if necessary). (Be specific)

November 19 2015

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

November 19 2015

Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

11/19/2015

Dated \_\_\_\_\_

Signature \_\_\_\_\_

(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)

Migdalía Cuevas

\_\_\_\_\_  
(Typed or printed name of person signing)

Registered Agent

\_\_\_\_\_  
(Title of person signing)