(Re	questor's Name)	
(Add	dress)	
(Ado	dress)	
(City	y/State/Zip/Phone	- #)
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(Do	cument Number)	
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ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

Mt. Zion NAME OF CORPORATION:	Church			
764252 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and	fee are submitted for filing	g.		
Please return all correspondence concernin	g this matter to the follow	ring:		
Wanda Davis				
	(Name of Cor	tact Person)		
Mt Zion Church				
<u> </u>	(Firm/ Co	ompany)		
P.O. Box 297				
	(Addi	ress)		·
MacClenny Florida 32063	·	·		
	(City/ State ar	nd Zip Code)	- 	-
wandadavis9566@comcast.net				
E-mail address:	(to be used for future ann	ual report notification	on)	
For further information concerning this ma	itter, please call:			
Wanda Davis		904 at	408-0922	
(Name of Con	nact Person)	(Area Code)	(Daytime Telephone Nu	mber)
Enclosed is a check for the following amou	ant made payable to the F	lorida Department ol	State:	
■ \$35 Filing Fee □\$43.75 Fi Certificate	ling Fee & S43.75 Filise of Status Certified Conditional enclosed)	opy Certi copy is Certi (Add	50 Filing Fee ficate of Status fied Copy litional Copy is losed)	
Mailing Address Amendment Section		Street Address Amendment Sec	tion _	

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



July 27, 2019

WANDA DAVIS P.O. BOX 297 MACCLENNY, FL 32063

SUBJECT: MT. ZION NEW CONGREGATIONAL METHODIST CHURCH, INC.

Ref. Number: 764252

We have received your document for MT. ZION NEW CONGREGATIONAL METHODIST CHURCH, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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.

Irene Albritton Regulatory Specialist II

Letter Number: 519A00015343

Articles of Amendment to Articles of Incorporation of

Mt Zion New Congregational Methodist Church Inc.

(Name of Corporation as cur	rently filed with the F	lorida Dept. of State)
764252		
(Document No	umber of Corporation (i	f known)
Pursuant to the provisions of section 617.1006, Florida Stannendment(s) to its Articles of Incorporation:	ntutes, this <i>Florida Not</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	eration:	
Mt. Zion Church, Inc		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorpore	ited" or the abbreviation "Corp," or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRE	<u>SSS</u>)	201
		···
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	21
(Maining mainess <u>MATE DESTITION OF THE STOCK</u>)		
).H (0: 35
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		
N/A		
Name of New Registered Agent:		
New Registered Office Address:	-	(Florida street address)
N/A		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I as	ered Agent: m familiar with and acc	rept the obligations of the position.
	Signature of New Re	gistered 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: \underline{X} Change \underline{X} Remove \underline{X} Add	<u>V</u> <u>Mi</u>	n Doe se Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	Thomas Carter	5575 Huckleberry Trail N
x Add			Macclenny, FL 32063
Remove			
2) Change	Р	Tim Cheshire	5575 Huckleberry Trail N
Add			MacClenny, FL 32063
X Remove			
3) Change	TR	James Kirkland	River Circle
Add			MacClenny, FL 32063
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)	
····		

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		48 122 7

	N/A	
The date of each amend date this document was s		_, if other than the
	N/A	
Effective date if applica	nble:	
	(no more than 90 days after amendment file date)	
Note: If the date inserte document's effective date	d in this block does not meet the applicable statutory filing requirements, this date will not be on the Department of State's records.	pe listed as the
Adoption of Amendme	nt(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
☐ There are no memb adopted by the boar	pers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.	
Dated	N/A	
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)	
	Wanda Davis	
	/ (Typed or printed name of person signing)	
	(1) peaces prime in the control of th	
	Lwanda Davis ST	
	(Title of person signing)	