

766132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100280667501

01/06/16--01020--009 **43.75

FILED

2016 JAN -6 AM 10:34

RECEIVED

NC *CE
1.12.11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ST. JOHN A.M.E. CHURCH INC.

DOCUMENT NUMBER: 766132

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

Please return all correspondence concerning this matter to the following:

Rev. Millard Campbell

(Name of Contact Person)

ST. JOHN A.M.E. CHURCH INC.

(Firm/ Company)

6461 SW 59th PL

(Address)

South Miami, FL 33143

(City/ State and Zip Code)

stjohnnamesmiami@gmail.com

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

For further information concerning this matter, please call:

Rev. Millard Campbell

305-665-1191

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



**St. John
African Methodist Episcopal Church**

6461 S.W. 59th Place
South Miami, FL 33143
Office: (305) 665-1191 Fax: (305) 665-7703

Reverend Millard Campbell, Pastor

December 14, 2015

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

Re: 766132

TO WHOM IT MAY CONCERN:

Enclosed is a copy of *Articles of Amendment* along with the Resolution for change.

St. John is pleased to announce that we have a “new” name. From now on, we will be called the “**Historic Saint John African Methodist Episcopal Church Inc.**” This happened on October 8, 2015 during the 125th South Annual Conference meeting. Please be so kind as to let your records show the same.

It is our hope that you will come celebrate our **Church's One Hundred Years of Kingdom Building in South Miami, 1916-2016**. We would not have made it without you, so please come support us in celebrating *One Hundred Wonderful Years*.

Stay tuned for more details regarding this momentous occasion, which will soon follow.

Be blessed and thanking you in advance.

Historic Saint John AME Family,

Millard Campbell

Rev. Millard Campbell, Pastor
Historic St. John AME Church

MC:fb

Enclosure

Articles of Amendment
to
Articles of Incorporation
of

ST. JOHN A.M.E. CHURCH INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

766132

(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:

HISTORIC SAINT JOHN AFRICAN METHODIST EPISCOPAL CHURCH 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:
(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

N/A

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

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

(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.

N/A

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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> 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) Change N/A _____
Add _____
Remove _____

2) _____ Change _____
_____ Add _____
_____ Remove _____

3) Change _____
 Add _____
 Remove _____

4) Change _____

Add _____

Remove _____

5) _____ Change _____
_____ Add _____
_____ Remove _____

6) Change _____

Add _____

Remove _____

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

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

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.

Dated December 14, 2015

Signature Millard Campbell
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)

Millard Campbell

(Typed or printed name of person signing)

Pastor

(Title of person signing)