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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: $Faus 7$	Timple Ci	nullely of Bed IN Chri
DOCUMENT NUMBER: N ( 139		<u> </u>
The enclosed Articles of Amendment and fee are sub-	nitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Ethel Lamar		
	(Name of Contact Perso	on)
Faust Timple C.	hurch of	God In Christ
•	(Firm/ Company)	
3328 Moneriet	Rd	
	(Address)	
Jacksonville, F	Toriola 3	3 2 2 0 9
	(City/ State and Zip Coo	ie)
ethellamar @ bu E-mail address: (to be used	1190417. Ne	enotification)
For further information concerning this matter, please	•	
	Can.	
Ethil Ranievi	at l	104-386-4541
(Name of Contact Person		rea Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Dep	partment of State:
¥ \$35 Filing Fee □\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee
Certificate of Status	Certified Copy	Certificate of Status
	(Additional copy is enclosed)	Certified Copy (Additional Copy is
	aneroneary.	Enclosed)
Mailing Address	Street	Address
Amendment Section	Amen	dment Section
Division of Corporations	Divisi	on of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment

to

## Articles of Incorporation of

FAUST TEmple Chur			IN	Christ	Inc
(Name of Corporation as currently filed with the Flo	orida Dept. of State	2)		,	
	139				
(Document	Number of Corpora	tion (if kno	own)		
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florid	a Not For	Profit Cor	poration adopts the	following
A. If amending name, enter the new name of the con	rporation:				
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "ince	orporated '	or the abb	previation "Corp." o	The new r "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDI</u>			<del></del>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u>(Y)</u>				<u>_</u>
D. If amending the registered agent and/or registere new registered agent and/or the new registered o		Florida, e	nter the n	ame of the	-
Name of New Registered Agent:					
New Registered Office Address:		(Flor	ida street add	tress)	
				. Florida	
	(City)			(Zip Code)	
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I		d accept ti	ie obligatio	ons of the position.	
	Signature of Ne	w Register	ed Agent, i	fchanging	
				727	<u>.</u>
	Page 1 of 4			- 1	;
					)

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>Mike</u>	Doe 2 Jones 2 Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add		Ethel Lamur	P. D. BOX 12,348 Jay FT 32200
Remove			
2) Change Add	TR	Toninie Dingle	7169 Rutland Jay FI CT
Remove 3 ) Remove Add Remove	<del></del>		
4) Change Add			
Remove			
5) Change Add			
Remove			·
6) Change Add			
E. If amending or add	ing additional A	Page 2 of 4 <a href="https://www.ereichange(s)">wrticles, enter change(s) here</a> :  (Be specific)	
			-11

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Page 3 of 4
a/a
The date of each amendment(s) adoption: $\frac{\lambda/\lambda U}{\lambda U}$ . if other than the
date this document was signed.
The date of each amendment(s) adoption: $\frac{2}{24}$ . if other than the date this document was signed.  Effective date if applicable: $\frac{2}{24}$
(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.

here are no members of dopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were f directors.
Dated	2-24-20
Signature	Clarce Jones
have	he chairman or vice chairman of the board, president or other officer-if directors in not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	Clarence Jones
_	(Typed or printed name of person signing)
	President
_	(Title of person signing)