1102000002854

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP		MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number))
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JUN 0 8 2010

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: New Mount Pl	easant Missionary Bap	tist Church Inc.
DOCUMENT NUMB	er: N02000	002854	
The enclosed Articles of	of Amendment and fee are sub	omitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
		e Cummings	
	(Name of	Contact Person)	
		lissionary Baptist Church Ir	nc
	(Firm	n/ Company)	
	······	licker Avenue	
	(,	Address)	
		le, Florida 32219	·
	(City/ Sta	te and Zip Code)	
 		NGS@comcast.net d for future annual report notific	ation)
For further information	concerning this matter, please	e call:	
Bobbi	e Cummings	at (904) 766-595	57
	f Contact Person)		me Telephone Number)
Enclosed is a check for	the following amount made p	payable to the Florida Departmen	nt of State:
☑\$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)
	g Address ment Section	Street Address Amendment Section	,
	n of Corporations	Division of Corporation	ons
	ox 6327	Clifton Building	
Tallaha	ssee, FL 32314	2661 Executive Cente	er Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	w Mount Pleasant Missionary Baptist Church Inc. se of Corporation as currently filed with the Florida Dept. of State	
(3.354.3		
	N02000002854	
	(Document Number of Corporation (if known)	

A. If amending name, enter the new name of t	he corporation	<u>n:</u>		
The new name must be distinguishable and con abbreviation "Corp." or "Inc." "Company" or	ntain the word "Co." may not	"corporation" or "ir be used in the name.	acorporated" or the	
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET)			SECRETA	George
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>E BOX</u>)		Y OF STATI	
D. If amending the registered agent and/or removed new registered agent and/or the new registered.			nter the name of th	<u>e</u>
Name of New Registered Agent:		Alexie Kelly	*********	
_	8758	Norfolk Blvd.		
New Registered Office Address:	(Flori	da street address)		
_	Ja	cksonville	, Florida_32208	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a position.		gent:	cept the obligations	of th

Signature of New Registered Agent, if changing

Page 1 of 3

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
PD	Willie Coleman	1680 Stafford Road Jacksonville, Florida 32208	☐ Add ☑ Remove
PD	Rev. Alexie Kelly	8758 Norfolk Blvd Jacksonville, Florida 32208	☑ Add ☐ Remove
<u>VD</u>	Deacon Robert Cummings	3935 Victoria Landing Dr. North Jacksonville, Florida 32208	☑ Add ☐ Remove
E. If amendin (attach addi	g or adding additional Articles, enter c tional sheets, if necessary). (Be specific		
		· · · · · · · · · · · · · · · · · · ·	
-	·		
	70.11 A		

The date of each amendment(s) adoption:	May 22, 2010
Effective date if applicable:	(date of adoption is required) May 22, 2010
	nore than 90 days after amendment file date)
Adoption of Amendment(s)	CHECK ONE)
The amendment(s) was/were adopted by t was/were sufficient for approval.	he members and the number of votes cast for the amendment(s)
There are no members or members entitle adopted by the board of directors.	ed to vote on the amendment(s). The amendment(s) was/were
Signature By the chairman of have not been sele other court appoin	27, 2010 or vice chairman of the board, president or other officer-if directors ected, by an incorporator—if in the hands of a receiver, trustee, or ted fiduciary by that fiduciary) Bobbie Cummings Typed or printed name of person signing)
	Chairman, Board of Trustees (Title of person signing)