

NOH 000000 4721

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

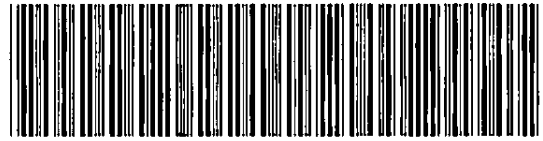
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200430064752

05/21/24--01002--018 **35.00

FILED
2024 JUN 10 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 26, 2024

EDNA BROWN
550 FRANKLIN STREET
BALDWIN, FL 32234

SUBJECT: NEW ST. PAUL MISSIONARY BAPTIST CHURCH, INC.,
Ref. Number: N04000004721

We have received your document for NEW ST. PAUL MISSIONARY BAPTIST 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):

The form you submitted is for a PROFIT CORPORATION, but your entity is a NONPROFIT CORPORATION. Please complete and return the enclosed blank form(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.

SHANTELL BROWN
Regulatory Specialist II

Letter Number: 124A00014007

... - 10-24

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: New St. Paul Missionary Baptist Church, Inc.

DOCUMENT NUMBER: N04000004721

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

Please return all correspondence concerning this matter to the following:

Edna Brown
(Name of Contact Person)

New St. Paul Missionary Baptist Church
(Firm/ Company)

550 Franklin Street
(Address)

Baldwin, Florida 32234
(City/ State and Zip Code)

newstpaulmbc7@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edna Brown at 904 502-7423
(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:

- \$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)

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

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2024 JUN 10 PM 2:36
 SECRETARY OF STATE
 TALLAHASSEE
 FILED

Articles of Amendment
to
Articles of Incorporation
of

New St. Paul Missionary Baptist Church, Inc

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

N04000004721

(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:

_____ *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**)*

550 Franklin Street
Baldwin, Florida 32234

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

550 Franklin Street
Baldwin, Florida 32234

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: Edna Brown

550 Franklin Street
(Florida street address)

New Registered Office Address:

Baldwin, Florida 32234
(City) (Zip Code)

2021 JUN 10 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

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.

Edna Brown

Signature of New Registered Agent, if changing

Lined area for text entry.

FILED
2021 JUN 10 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FL

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 May 10, 2024

Signature *Edna Brown*

(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)

Edna Brown
(Typed or printed name of person signing)

Registered Agent. Trustee
(Title of person signing)

FILED
2024 JUN 10 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FL