

N04 0000005386

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

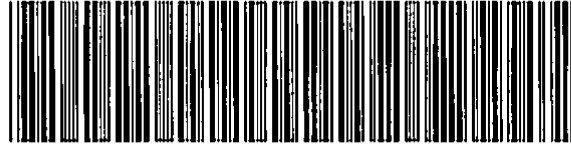
(Business Entity Name)

(Document Number)

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FILED  
2020 MAY 21 AM 9:02  
SECRETARY OF STATE  
HALLMARKS SECRET

am  
6/11/20

**COVER LETTER**

Department of  
Division of Corporations

NAME OF CORPORATION: Williams Temple Church of God in Christ

DOCUMENT NUMBER: N04000005386

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

Please return all correspondence concerning this matter to the following:

Rose Smith

(Name of Contact Person)

Williams Temple Church of God in Christ

(Firm/ Company)

28 NW 7th Avenue

(Address)

Gainesville, Florida 32601

(City/ State and Zip Code)

tenyardatfeathers@gmail.com

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

For further information concerning this matter, please call:

Rose Smith

386

266-3039

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

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

2020 MAY 21 AM 9:02

WILLIAMS TEMPLE CHURCH OF GOD IN CHRIST, INC.

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

SECRETARY OF STATE  
TALLAHASSEE, FL 32399

1004000005386

(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:

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.

Enter new principal office address, if applicable:

Principal office address MUST BE A STREET ADDRESS

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: ROSE SMITH

17480 NW 222ND STREET

(Florida street address)

New Registered Office Address:

HIGH SPRINGS

(City)

Florida 32643

(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.

Rose M Smith

Signature of New Registered Agent, if changing

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action (Check One)	Title	Name	Address
i) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>CEO</u>	<u>KENAYARDA T FEATHERS</u>	<u>14475 NW 21ST PLACE</u> <u>NEWBERRY, FL 32669</u>
j) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>CFO</u>	<u>RONDA FEATHERS</u>	<u>14475 NW 21ST PLACE</u> <u>NEWBERRY, FL 32669</u>
k) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>C</u>	<u>GEORGE SMITH</u>	<u>17480 NW 222ND STREET</u> <u>HIGH SPRINGS, FL 32643</u>
l) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>S</u>	<u>TANISHA BYARS</u>	<u>2903 NW 6TH STREET</u> <u>GAINESVILLE, FL 32609</u>
m) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>T</u>	<u>SANGERNETTA WALDON</u>	<u>1831 SE 39TH TERRACE</u> <u>GAINESVILLE, FL 32641</u>
n) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add  <input type="checkbox"/> Remove	<u>T</u>	<u>RUDOLPH LASTER</u>	<u>1533 SE 15TH AVENUE</u> <u>GAINESVILLE, FL 32641</u>

2. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

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amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name,

l address of each Officer and/or Director being added:

each additional sheets, if necessary)

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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. President, Treasurer, Director would be PTD.

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ample:

<input type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
<input type="checkbox"/> Change	<u>CEO</u>	<u>DETROIT R WILLIAMS</u>	<u>7407 NW 21ST COURT</u>
<input type="checkbox"/> Add			<u>GAINESVILLE, FL 32653</u>
<input checked="" type="checkbox"/> Remove			
<input type="checkbox"/> Change	<u>CHAI</u>	<u>JAMES SINGLETON</u>	<u>2403 NE 12TH STREET</u>
<input type="checkbox"/> Add			<u>GAINESVILLE, FL 32609</u>
<input checked="" type="checkbox"/> Remove			
<input type="checkbox"/> Change	<u>SUPV</u>	<u>JOHN STEWART</u>	<u>PO BOX 85</u>
<input type="checkbox"/> Add			<u>MICANOPY, FL 32667</u>
<input checked="" type="checkbox"/> Remove			
<input type="checkbox"/> Change	<u>TREA</u>	<u>CLARA S GRAHAM</u>	<u>4121 NE 15TH STREET, BLDG 7</u>
<input type="checkbox"/> Add			<u>GAINESVILLE, FL 32609</u>
<input checked="" type="checkbox"/> Remove			
<input type="checkbox"/> Change	<u>A TR</u>	<u>MARVIN MCTAW</u>	<u>4915 NW 28TH TERRACE</u>
<input type="checkbox"/> Add			<u>GAINESVILLE, FL 32605</u>
<input checked="" type="checkbox"/> Remove			
<input type="checkbox"/> Change	<u>A TR</u>	<u>ERIC LASTER</u>	<u>2822 NE 16TH TERRACE</u>
<input type="checkbox"/> Add			<u>GAINESVILLE, FL 32609</u>
<input checked="" type="checkbox"/> Remove			

**If amending or adding additional Articles, enter change(s) here:**

(attach additional sheets, if necessary). (Be specific)

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Lined area for text entry.

The date of each amendment(s) adoption: JANUARY 7, 2016, if other than the date this document was signed.

Effective date if applicable: JANUARY 7, 2016  
*(no more than 90 days after amendment file date)*

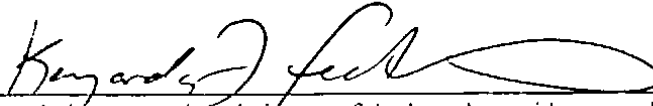
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 13, 2020 \_\_\_\_\_

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)

KENYARDA T. FEATHERS  
\_\_\_\_\_  
(Typed or printed name of person signing)

CEO/ SUPERINTENDENT/ PASTOR  
\_\_\_\_\_  
(Title of person signing)