

N050000003697

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

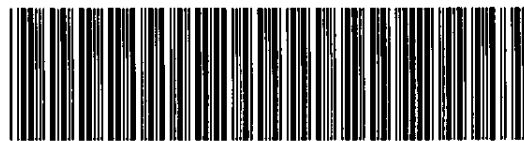
(Business Entity Name)

(Document Number)

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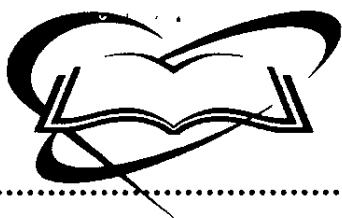
02/03/12--01029--012 **35.00

Amend M

FILED
12 FEB -3 AM 9:29
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FEB 06 2012
T. ROBERTS

Open Bible Community Church of North Miami, Inc.



2610 NW 119TH STREET, MIAMI, FLORIDA 33167

PH. (305) 769-1420 FAX: (305) 769-2977

E-MAIL: OBCCARES@GMAIL.COM WEBSITE: OBCCMIAMI.COM

REV. A. N. GUTHRIE, LCCC, DD, SENIOR PASTOR

February 1, 2012

Florida Department of State

Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, Fl. 32314

Dear Sir,

The Word of Life Family Center, Inc., hereby makes application for a change of name. The new name being applied for is: Word of Life Open Bible Church, Inc. If this name is approved then amendments to the Articles of Incorporation will follow.

As the registered agent, I am filing on behalf of the Church in question. I can be reached at the number above, also (305) 528-3292.

Thank you kindly.

Sincerely,

Rev. Albert N. Guthrie

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Word of Life Family Center, Inc.

DOCUMENT NUMBER: N05000003697

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

Please return all correspondence concerning this matter to the following:

Rev. Albert Guthrie

(Name of Contact Person)

Open Bible Community Church of North Miami, Inc.

(Firm/ Company)

2610 NW 119th Street

(Address)

Miami, Florida 33167

(City/ State and Zip Code)

obcccares@gmail.com

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

For further information concerning this matter, please call:

Albert Guthrie

(Name of Contact Person)

at 305 528-3292

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

<input checked="" type="checkbox"/> \$35 Filing Fee	<input type="checkbox"/> \$43.75 Filing Fee &	<input type="checkbox"/> \$43.75 Filing Fee &	<input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status	Certified Copy	Certificate of Status	Certified Copy
	(Additional copy is	(Additional Copy is	
enclosed)		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

Articles of Amendment
to
Articles of Incorporation
of

FILED

12 FEB -3 AM 9:29

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

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Word of Life Family Center, Inc.

(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:

Word of Life Open Bible 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)

2305 Lakeview Drive

Lehigh Acres, Fl. 33936

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

Rev. John Alleyne

2305 Lakeview Drive

Lehigh Acres, Fl. 33936

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.

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:

☒ Change PT John Doe
☒ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Livingstone Knowles</u>	<u>8925 NE 9th Court</u> <u>Miami, Fl. 33137</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>DT</u>	<u>Joseph Green</u>	<u>920 Greenwood Ave.</u> <u>Lehigh Acres, Fl. 33972</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Hope Richards</u>	<u>609 Highland Ave.</u> <u>Lehigh Acres, Fl. 33972</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>Marylou Antoine</u>	<u>1441 NW 113th Terrace</u> <u>Miami, Fl. 33167</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Gloria Callender</u>	<u>3009 Palmetto Oak Dr. Apt. 105</u> <u>Ft. Myers, Fl. 33916</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>Arlene Khouri</u>	<u>14445 NW 11th Court</u> <u>Miami, Fl. 33168</u>

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

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

The registered office address remains the same, however, the Corporate mailing address should be the location of the Church, which is:

2305 Lakeview Drive, Lehigh Acres, Fl. 33936

The date of each amendment(s) adoption: NOVEMBER 26th 2011

Effective date if applicable: N/A
(no more than 90 days after amendment file date)

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 2-1-12

Signature Albert Gutierrez

(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)

ALBERT GUTIERREZ
(Typed or printed name of person signing)

SENIOR PASTOR
(Title of person signing)