## N050000009916

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Anund, 12/10/09

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

Soulding	- I Marich 1m	
NAME OF CORPORATION:	For Christ ADC	+nc.
DOCUMENT NUMBER: NOS 00000	7976	
The enclosed Articles of Amendment and fee are subr	nitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Angela Mealer (Name of	Contact Person)	
Souldiers For Chris	HADC Inc.	
2045 Tuskogee Rd	ddress)	
Jacksonville, FL 32 (City/State	no9 e and Zip Code)	
the mealurs @yahoo. Cor E-mail address: (to be used	✓ for future annual report notificati	on)
For further information concerning this matter, please	call:	
Angela Mealer (Name of Contact Person)	_at ( 904 ) 200 ~ E	5533
(Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Department o	f State:
\$35 Filing Fee \$\sum \\$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 Clifton Building 2661 Executive Center C	

Tallahassee, FL 32301

## **Articles of Amendment**

to

<b>Articles of Incorporation</b>
----------------------------------

	of ,			
Souldiers for Chri	ist, All		ation Churc	h,I
(Name of Corporation as curr	ently filed with	the Florida Dept. of S	State)	,
N0500000	9976			
(Document Nu	mber of Corporat	tion (if known)		ည
Pursuant to the provisions of section 617.1006 the following amendment(s) to its Articles of I	, Florida Statutes ncorporation:	s, this <i>Florida Not For</i>	Profit Corporation Copy	CRETAR
A. If amending name, enter the new name of	of the corporation	on:	7 AMI	45.77 407.8 10.74 10.74
The new name must be distinguishable and cabbreviation "Corp." or "Inc." "Company"			ncorporated" or the	器
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		10455 Pre Jacksony	<u>stlawn Driv</u> Ille FL 32	'É .208
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		2045 Tus Jackson	skegee Rd. :1le, FL 3220	9
D. If amending the registered agent and/or new registered agent and/or the new registered	•		enter the name of the	
Name of New Registered Agent:			<u> </u>	
New Registered Office Address:	(Flor	ida street address)		
			, Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registere position.			cept the obligations of the	
	Signature of New	Registered Agent, if c	hanging	

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)

	Title	Name	Address	Type of Action
		Marlena Simmons	2120 Silver Street Jacksonville, FL 3220	_ □ Add □ Remove
Dic	ector	Maey Lewis		Add  Add  Remove
Dire.	ctor	Octavia Jones	7149 Cumbria Blvd East Jacksonville FL	_
		ing or adding additional Articles, enterditional sheets, if necessary). (Be spec		
	······································			
•				
	····			
•				
•				
•				
·				

The date of each amendment(s) adoption:	cember 1, 2009
	date of adoption is required)
Effective date if applicable: (no more the	an 90 days after amendment file date)
Adoption of Amendment(s) (CHECI	(ONE)
The amendment(s) was/were adopted by the men was/were sufficient for approval.	nbers and the number of votes cast for the amendment(s)
There are no members or members entitled to vo	ote on the amendment(s). The amendment(s) was/were
Dated 12 1 09 Signature anglar	Meales
	chairman of the board, president or other officer-if directors by an incorporator – if in the hands of a receiver, trustee, or aciary by that fiduciary)
Angel a	or printed name of person signing)
Chief Fi	nancial Officer (itle of person signing)