# N05000010220

(Re	equestor's Name)	
·	,	
(Ac	idress)	
		•
(Ac	ldress)	
<b>(</b> 0:	10-1-17: (01-	- 40
(C)	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
	_	<u> </u>
Special Instructions to	Filing Officer:	
1		

Office Use Only



600213166296

10/17/11--01007--013 \*\*35.00

FOCT 17 AM SEST

**C.COULLIETTE** 

OCT 18 2011

**EXAMINER** 

#### COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: NEW SALEM	1 MINISTRIES, CDC, IN	NC.	
DOCUMENT NUM	век: <u>N05000010220</u>			
The enclosed Articles	of Amendment and fee are sub	bmitted for filing.		
Please return all corre	espondence concerning this man	tter to the following:		
	Mrs.	Willie Lyons		
		Contact Person)		
	NEW SALEM M	INISTRIES, CDC, INC.		
	(Firn	n/ Company)		
	<del></del>	Dregon Avenue		
	(	Address)		
	•	Fiorida 33606		
	(City/ Sta	ite and Zip Code)		
	wiyons? E-mail address: (to be use	(@verizon.net ed for future annual report notific	cation)	
For further information	on concerning this matter, pleas	e call.		
Mrs Willie Lyons	i	<sub>at (</sub> 863     ) 660-000	<del>64</del>	
	of Contact Person)	at ( 863 ) 860-001 (Area Code & Dayti	ime Telephone Number)	
Enclosed is a check for	or the following amount made p	payable to the Florida Departmen	nt of State:	
☑\$33 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filling Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address  Amendment Section		Street Address Amendment Section		
	ion of Corporations Sex 6327	Division of Corporati Clifton Building	Division of Corporations	
	nassee, FL 32314	2661 Executive Cente Tallishusser, FL 3230		

### **Articles of Amendment Articles of Incorporation**

#### NEW SALEM MINISTRIES, CDC, INC.

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

#### N05000010220

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts

criation corp. or me. company	<u>" or "Co." may not</u>	be used in the name	incorporated" or the
Enter new principal office address, if a incipal office address MUST BE A STR			
Enter new mailing address, if applical (Mailing address MAY BE A POST OF			
If amending the registered agent and/o			enter the name of th
If amending the registered agent and/o new registered agent and/or the new re Name of New Registered Agent:			enter the name of th
new registered agent and/or the new re	egistered office add		enter the name of th
new registered agent and/or the new re Name of New Registered Agent:	egistered office add	ress:	enter the name of th  , Florida, Florida

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)

Title <u>Name</u> <u>Address</u> Type of Action ☐ Add ☐ Remove \_\_\_\_ Add ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Remove Article V

The date of each amendmen	t(s) adoption: 09/01/2011
Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_10/1	12/2011
(By	y the chairman or vice chairman of the board, president or other officer-if directo we not been selected, by an incorporator – if in the hands of a receiver, trustee, her court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)