

NO6000001289

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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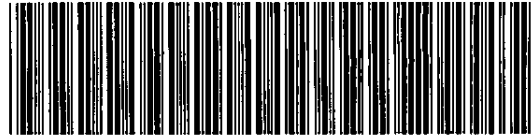
(Business Entity Name)

(Document Number)

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14 JAN -6 PM 4:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

C. Lewis
1-13-14

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MARANATHA ASSEMBLY OF GOD OF JACKSONVILLE INC.
(Name of Corporation)

DOCUMENT NUMBER: N06000001289

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

WYNETTE BULLINGTON

(Name of Person)

MARANATHA ASSEMBLY OF GOD OF JACKSONVILLE INC

(Name of Firm/Company)

16411 VILLAGE GREEN DR N

(Address)

JACKSONVILLE FL 32234

(City/State and Zip Code)

For further information concerning this matter, please call:

WYNETTE BULLINGTON at **904** **266-2008**

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

APPROVED
AND
FILED

14 JAN -6 PM 4: 39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

MARANATHA ASSEMBLY OF GOD OF JACKSONVILLE INC

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

N06000001289

(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**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

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: _____

(Florida street address)

New Registered Office Address:

_____, Florida _____
(City) (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

(Attach additional sheets, if necessary)

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.

<u>X</u> Change	PT	<u>John Doe</u>
<u>X</u> Remove	V	<u>Mike Jones</u>
<u>X</u> Add	SV	Sally Smith

Address

6) _____ Change _____
 _____ Add _____
 Remove _____

[illegible]

APPROVED
AND
FILED

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

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Effective date if applicable: 12/29/2013
(no more than 90 days after amendment file date)

SECRETARY OF STATE

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 12-29-2013

Signature Wynette Bullington
(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)

WYNETTE BULLINGTON

(Typed or printed name of person signing)

DIRECTOR/SECRETARY

(Title of person signing)