NO7000004182

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TO:

Amendment Section Division of Corporations

NEW HOPE MISSIONARY BAPTIST CHURCH OF ANTHONY, FLORIDA, INC.

SUBJECT:

Name of Corporation

DOCUMENT NUMBER

107000004182

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John C. Trentelman

Name of Contact Person

John C. Trentelman, attorney

Firm/Company

207 N. Magnolia Ave.

Address

Ocala, FL 34475

City/State and Zip Code

dirtlawyer47@aol.com

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

For further information concerning this matter, please call:

John C. Trentelman

352 (732-69)

Name of Contact Person

Area Code & Daytime Telephone Number

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

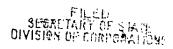
Mailing Address:

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



NEW HOPE MISSIONARY BAPTIST CHURCH OF ANTHONY, FLORIDA, INC.

15 AUG 10 PM 1: 06

(Name of Corporation as current	ly filed with the Florida Dept. o	f State)
N07000004182		
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit Cor</i>	rporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
N/A		The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the ab	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered offic	e address in Florida, enter the n	same of the
new registered agent and/or the new registered office a		<u></u>
Name of New Registered Agent: N/A		
	(5)	
(Florida street address) New Registered Office Address:		aress)
		, Florida
	(City)	(Zip Code)
Nam Dogistanad Aganth Simplement School D.	A	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far		ions of the position.
- , ,,		A Lagrage
Si	onature 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: X Change X Remove X Add		Doe e Jones v Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add X	PD	VERNON D. CHISHOLM	
Remove 2) X Change	PD	LEWIS P. WOODS, JR.	P.O. BOX 502
Add Remove 3) Change X Add	VD	ROBERT E. MITCHELL	ANTHONY, FL 32617 P.O. BOX 401 ANTHONY, FL 32617
Remove 4) Change X Add	SD	LINCOLN C. MITCHELL, JR.	2061 NE 86TH LANE ANTHONY, FL 32617
Remove 5) Change Add			
Remove 6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
(attach additional sheets, if necessary). ((Be specific)			
NONE				
	· · · · · · · · · · · · · · · · · · ·			
	,			
	<u> </u>			
	· <u> </u>			

		JULY 29, 2015	
	e of each ame document was	ndment(s) adoption:signed.	SECRETARY OF SHORE DIVISION OF CORPORALITONS
Effectiv	e date <u>if appli</u>		
		(no more than 90 days after amendment file	date) 15 AUG TO PH 1: U6
		red in this block does not meet the applicable statutory filing require on the Department of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)		ent(s) (CHECK ONE)	
) was/were adopted by the members and the number of votes can to for approval.	st for the amendment(s)
		bers or members entitled to vote on the amendment(s). The amend of directors.	endment(s) was/were
	Dated	JULY 29, 2015	
	Signature		
		(By the chairman or vice chairman of the board, president or of have not been selected, by an incorporator – if in the hands of other court appointed fiduciary by that fiduciary)	
		LEWIS P. WOODS, JR.	
		(Typed or printed name of person si	gning)
		PRESIDENT	
		(Title of person signing)	