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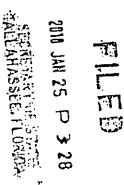
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JAN 25 2018 T. LEMIEUX



COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: GRAYS TEMPLE Christian Methodist Episcopal |
|---|
| Church /NC. DOCUMENT NUMBER: NO 70000 7620 |
| |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| ERROL DARVILLE (Name of Contact Person) |
| (Name of Contact Person) |
| GRAYS Temple C.M. E church (Firm/Company) |
| |
| 523 18th Street (Address) |
| (Address) |
| West Palm Beach Fl 33407 (City/ State and Zip Code) |
| |
| erroldarville a gmail, Com E-mail address: (to be used for future annual report notification) |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Robert Hamilton at (561) 307-4559 (Name of Contact Person) (Area Code) (Daytime Telephone Number) |
| (Name of Contact Person) (Area Code) (Daytime Telephone Number) |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |
| \$35 Filing Fee |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations Division of Corporations Clifton Building Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations Clifton Building Tallahassee, FL 32314 |
| Tallahassee, FL 32301 |

Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as curren | a a a a a h sea | | |
|--|-------------------------|---------------------------------------|---------------------------------------|
| | tly filed with the Flo | rida Dépt. of State) | |
| BRAY'S Temple Christian (Name of Corporation as curren NO 7.00000 7620 | o | | |
| (Document Numb | er of Corporation (if k | mown) | |
| ursuant to the provisions of section 617.1006, Florida Statute nendment(s) to its Articles of Incorporation: | s, this Florida Not Fo | or Profit Corporation adopts | the following |
| . If amending name, enter the new name of the corporati | on: | | |
| | _ | | 7 11 |
| nme must be distinguishable and contain the word "corporat Company" or "Co." may not be used in the name. | ion" or "incorporate. | d" or the abbreviation "Cor | The new p.'' or "Inc." |
| . Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>) | , | <u> </u> | |
| | | | · · · · · · · · · · · · · · · · · · · |
| . Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | | |
| | | | |
| | | | - |
| | | | |
| . If amending the registered agent and/or registered office | | , enter the name of the | |
| new registered agent and/or the new registered office a | ddress: | * | |
| Name of New Registered Agent: R. | RUL DAR | villE | |
| S Name of New Registered Agent: ER. | 6 CONTAR | in Place | |
| | (F | lorida street address) | |
| † <u>New Registered Office Address:</u> | / - / | / | |
| $\omega\varepsilon$ | St Palm I | BEACH, Florida <u>3</u> (Zip Code) | 3409 |
| | (Chy) | (z.ip Code) | , |
| ew Registered Agent's Signature, if changing Registered | | e tha abliqueiana af tha madic | · |
| hereby accept the appointment as registered agent. I am far | nitiar with and accept | i the obligations of the postil | on. |
| x 2 | | 11 | 2010 |
| Si | gnature of New Regis | tered Agent, if changing | 777 |
| | Page 1 of 4 | HASSES FLO | JAN 25 P 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)

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add | | Doe Jones Smith | |
|--|-------------------------|-----------------------|---|
| Type of Action (Check One) | Title | <u>Name</u> | Address |
| 1) X Change | <u>P</u> | DArville, ERROL | 306 ONTARIO PLACE |
| Add Remove | , | | West PALM BEACH, Floring 33409 |
| 2) X_ Change | | Hamilton, Robert | 838 30th street |
| Add Remove | | | West Palm Beach Florida 33407 |
| 3) X Change | <u>S</u> | GlASS, SARAH | 3904 Shelley Rd. South West Palm Beach |
| Remove | | | Florion 33407 |
| 4) X Change | I | JACKSON, Mercades | _ |
| Add Remove | | | WEST PAlm BEACH, Florida 33417 |
| 5) X Change | \supset | Roberts, Carmen | 721 South Pine St. |
| Add Remove | | | Apt. A Lake Worth, F1 33460 |
| δ) Change | $\overline{\mathbb{D}}$ | Flagler, Lewis | 1348 774 Street |
| Add | | | West Palm Beach |
| Remove | | Page 2 of 4 | Floring 33401 |

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

| President - Nicholas T. O'NEAL, | Leaves the Corporation |
|---------------------------------------|--|
| SECRETURY - DIANE PHRUIS, LEAVE | |
| Director - Lewis Flagler, LEAL | |
| TREASURER - TRACY MERRILL, LEAL | |
| Director - WESTERN JONES, LEAD | I and the second |
| Vice President - CARMEN Roberts, Ch | l control of the cont |
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| The date of each amendment(s) adoption: | , if other than the |
|---|--|
| date this document was signed. | |
| Effective date if applicable: | |
| (no more than 90 days after amer | dment file date) |
| Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records. | filing requirements, this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the members and the number of was/were sufficient for approval. | votes cast for the amendment(s) |
| There are no members or members entitled to vote on the amendment(s) adopted by the board of directors. | The amendment(s) was/were |
| Dated // JAN 2018 | |
| Signature Signature | |
| (By the chairman or vice chairman of the board, presing have not been selected, by an incorporator – if in the other court appointed fiduciary by that fiduciary) | |
| ERROL DARVILLE (Typed or printed name o | |
| (Typed or printed name o | f person signing) |
| PRESIDENT | |
| (Title of perso | on signing) |