N07829

(Requestor's Name)
Eddie M. Anderson, P.A. ATTORNEY AT LAW 227 SE Hernando Avenue, Post Office Box 1179 Lake City, Florida 32056-1179 (City/State/Zip/Phone #)
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SECRETARY OF STATE
ANASSFE, FLORIDA

Amend Tlewis 10-16-09

COVER LETTER

TO: Amendment Section Division of Corpora			
	foole me	EMORIAL INDEPENDENT	CHURCH
NAME OF CORPORAT	ION: OF GOD IM	EMORIAL INDEPENDENT CHRIST WITH CHRIST	DUE MUSSE MI
DOCUMENT NUMBER	:No	7829	
The enclosed Articles of A	mendment and fee are s	ubmitted for filing.	
Please return all correspon	dence concerning this m	atter to the following:	
	EDDIE M.	ANDERSON	
	EDDIE M. /	of Contact Person)	
	EDDIE M.	ANDERSON, P.A.	
	(Fi	rm/ Company)	
	Post office	Box 1179	
		(Address)	
	LAKE CITY,	FC 32056-1179 State and Zin Code)	
	(City/S	State and Zip Code)	·····
e	mapaloan@be	eNsouth, net used for future annual report notificat	
	E-mail address: (to be u	sed for future annual report notificat	ion)
For further information co	ncerning this matter, plea	ase call:	
SAMUEL L.	LATHAM	at (386) 623 ~ (Area Code & Daytime	3452
(Name of C	ontact Person)	(Area Code & Daytime	e Telephone Number)
Enclosed is a check for the	e following amount made	e payable to the Florida Department	of State:
	\$43.75 Filing Fee & ertificate of Status	\$43.75 Filing Fee & Certified Copy	☐ \$52.50 Filing Fee Certificate of Status
READY SENT) C	etimeate of Status	(Additional copy is enclosed)	Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporation Clifton Building	s
Tallahassee, FL 32314		2661 Executive Center Tallahassee, FL 32301	Circle



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 5, 2009

EDDIE M. ANDERSON, ESQ. EDDIE M. ANDERSON, P.A. P. O. BOX 1179 LAKE CITY, FL 32056-1179

SUBJECT: POOLE MEMORIAL INDEPENDENT CHURCH OF GOD IN CHRIST WITH CHRIST IN JESUS, INC.

Ref. Number: N07829

We have received your document for POOLE MEMORIAL INDEPENDENT CHURCH OF GOD IN CHRIST WITH CHRIST IN JESUS, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You have submitted an application which does not meet the current requirements of the Florida Statutes. You may complete our current form or amend your application to include the required information.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Léwis Document Specialist Supervisor

Letter Number: 109A00032176

Articles of Amendment to Articles of Incorporation of

POOLE MEMORIAL INDEPENDENT CH	filed with the	Florida Dept. of Sta	ite) IESU!	J.INC
N0782	.9			
(Document Number o		(if known)		
Pursuant to the provisions of section 617,1006, Florid the following amendment(s) to its Articles of Incorpo		is Florida Not For Pi	rofit Corporation ac	lopts
A. If amending name, enter the new name of the c	orporation:			
^	I (A			
The new name must be distinguishable and contain abbreviation "Corp." or "Inc." <u>"Company" or "Co</u>			orporated" or the	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD		MA	····	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE Bo</u>		NIA	SECRETARY OF STALLAHASSEE, FLO	FILED
D. If amending the registered agent and/or registered new registered agent and/or the new registered			er the native of the	,
Name of New Registered Agent:		(A	_	
New Registered Office Address:	(Florida	street address)	- .	
			_, Florida	
New Registered Agent's Signature, if changing Registered agential the appointment as registered agentical to the constitution.	gistered Ager	City) <mark>1t:</mark> iiliar with and accep	(Zip Code) of the obligations of	f the
	^	1/A		
Signati	ire of New Re	gistered Agent, if cha	nging	

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)

<u>Title</u>	Name	<u>Address</u>	Type of Action
MS.	TABITHA OWENS	LAKE CITY, FC 32055	☐ Add ⊠ Remove
<u>ms.</u>	SHEPPARD, MAYIS	3785 200+H 5+ Lake City, FL 32024	Add Remove
MR.	FRANKLIN, LANG C.	869 SW POPCAR LN CAKE City, FL 3202	Add Remove
(attach addit	g or adding additional Articles, enter christonal sheets, if necessary). (Be specific, ne Corporation Shall Mo of Directors Consist)	y a members.
	<u></u>		
			-

The date of each amendment(s) adoption: _	SEPTEMBER 28, 2009
Effective date if applicable:	(date of adoption is required) SEPTEMBER 2P, 2009
(no m	ore than 90 days after amendment file date)
Adoption of Amendment(s)	CHECK ONE)
The amendment(s) was/were adopted by twas/were sufficient for approval.	he members and the number of votes cast for the amendment(s)
There are no members or members entitle adopted by the board of directors.	ed to vote on the amendment(s). The amendment(s) was/were
Dated October	2 12 2009
Signature Say	L Lathan
have not been sele	or vice chairman of the board, president or other officer-if directors ected, by an incorporator – if in the hands of a receiver, trustee, or ted fiduciary by that fiduciary)
SA	MUEL L. CATHAM
(7	Typed or printed name of person signing)
	PRESIDENT (Title of person signing)
	(Title of person signing)