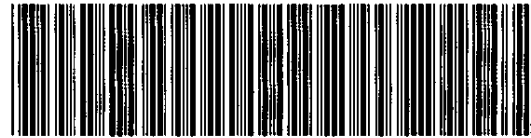


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10 JUL -2 PM 4:13
SECRETARY OF STATE
MALLINATHAN

Amend
7-9-10
DC

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MOUNT PELIER BAPTIST CHURCH, INCORPORATE

DOCUMENT NUMBER: N08000001655

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DANIEL SUMMERS

(Name of Contact Person)

(Firm/ Company)

P O BOX 494

(Address)

BELLEVIEW FL 34420

(City/ State and Zip Code)

gmillsaccountin@cfl.rr.com

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

For further information concerning this matter, please call:

DANIEL SUMMERS

(Name of Contact Person)

at (352) 245 2097

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee

\$43.75 Filing Fee &
Certificate of Status

\$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

\$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

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
of

Mount Pelier Baptist Church, Incorporated

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

N08000001655

(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:

SUMMERS, DANIEL T.

New Registered Office Address:

3365 S.E. 115th STREET

(Florida street address)

BENEVIEW

(City)

Florida 34420 US
(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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
D	MARY MOBLEY	P O BOX 494 BELLEVIEW FL 34420	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
S	GENEVA SUMMERS	P O BOX 494 BELLEVIEW FL 34420	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
VP	DANIEL T SUMMERS	P O BOX 494 BELLEVIEW FL 34420	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

REMOVE OFFICERS-DELETE CHANGE TO ADD

TITLE PD PD

GANT, JEROME S SCOTT, LEONARD

P.O. Box 106 P.O. Box 304

SUMMERFIELD, FL 34491 US WEIRSDALE, FL 32195 US

SD DVP

HAMPTON, PRISCILLA CRAWFORD, JOHN P

P.O. Box 1281 P.O. Box 1201

SUMMERFIELD, FL 34491 US BELLEVIEW, FL 34420 US

AS

ROBIE, TALISA

5845 SE 135 ST

BELLEVIEW, FL 34491 US

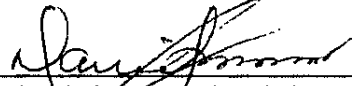
The date of each amendment(s) adoption: 06/11/2010
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 06/11/2010

Signature 

(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)

DANIEL T SUMMERS

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)