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A. RAMSEY MAY 1 & 2023

COVER LETTER

TO: Amendment Section **Division of Corporations**

CHARITY BAPTIST NAME OF CORPORATION:	CHURCH OF PERRY	FL, INC.
N08000005482		
DOCUMENT NUMBER:	<u> </u>	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
Danny Cooper Harrelson		
	(Name of Contact Perso	n)
Charity Baptist Church of Perry Fl		
	(Firm/ Company)	
580 E. Hwy 27		
	(Address)	
Perry, Fl 32347		
	(City/ State and Zip Cod	e)
charitybaptistchurchperryfl@gmail.com		
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
Danny Harrelson Davy Harlan	(22 atat	29) 834-001
(Name of Contact Person)		rea Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida Dep	artment of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & {	□\$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	Street	Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

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CHARITY BAPTIST CHURCH OF PERRY, FL, INC.		SEASTANNA		
Name of Corporation as currently filed with the Florida Dept. of State)		AHASSEE, FLORE		
(Document A	Sumber of Corporation (if k	nown)		
Pursuant to the provisions of section 617,1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following		
A. If amending name, enter the new name of the corp	poration:	The nev		
name must be distinguishable and contain the word "cor	rporation" or "incorporated			
"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 ADDR	ESS)			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A			
3). If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address in Florida. Tice address:	enter the name of the		
Name of New Registered Agent:	N/A			
New Registered Office Address:	(Fl	orida street address)		
		, Florida		
	(City)	(Zip Code)		
New Registered Agent's Signature, if changing Regist language lang	tered Agent: am familiar with and accept	the obligations of the position.		
	Signature of New Regists	ered 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	PT John Do V Mike Jo SV Sally Sn	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	T	Windell Blanton	440 SW Wakulla Wav Greenville, Fl 32331
2) Change Add	<u> </u>	Brenda Young	P O Box 834 Perry, Fl 32348
X Remove	<u> </u>	Michael Czernik	5690 Turner Rd Perry, Fl 32348
4) Change Add	<u> </u>	Kimberly Czernik	5690 Turner Rd Perry, Fl 32348
Remove 5) Change Add			
Change Add			
E. If amending or addin (attach additional sheet)		cles, enter change(s) here: (Be specific)	

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The date of each amendment date this document was signed	t(s) adoption:	02/22/2023				_, if other than the
Effective date if applicable:	02/22/2023					
meetire date it applicable.	(ne	o more than 90 da	ys after amendi	nent file date)		
Note: If the date inserted in the document's effective date on the	his block does i he Department	not meet the appli of State's records	cable statutory (filing requiremen	nts, this date will not	be listed as the
Adoption of Amendment(s)	(<u>(</u>	CHECK ONE)				
☐ The amendment(s) was/w			I the number of	votes east for the	e 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 62/25/2023 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)				
Danny Harrelson				
(Typed or printed name of person signing)				
Pastor				

(Title of person signing)