# N09000003255

(Re	questor's Name)	
(Ad	dress)	<u> </u>
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(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer	
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### FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED 2010 AUG 13 AM 8: 00 SECRETARY OF STATE FALLAHASSEE, FLORIDA

July 20, 2010

TONYA DAVIS UNITED MINISTRIES CHURCH 9802 - 12 BAYMEADOWS RD PMB 159 JACKSONVILLE, FL 32256

SUBJECT: UNITED MINISTRIES CHURCH OF JACKSONVILLE

**INCORPORATED** 

Ref. Number: N09000003255

We have received your document for UNITED MINISTRIES CHURCH OF JACKSONVILLE INCORPORATED and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the title(s) of each officer in your document.

Please show titles such as P, VP, S, T, & D. O is not a title.

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) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 910A00017517

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: United Ministri	es Church of Jacksonvil	lle Incorporated
DOCUMENT NUM	ивек: <u>N0900003255</u>		
The enclosed Article	es of Amendment and fee are sub	mitted for filing.	
Please return all corn	respondence concerning this matt	er to the following:	
		nya Davis	
	(Name of	Contact Person)	
	United Mi	nistries Church	
	(Firm	/ Company)	
<u>.</u>	9802-12 Bayme	eadows Rd PMB 159	
	(A	Address)	
	Jackson	ville, FL 32256	
	(City/ Stat	e and Zip Code)	
		/a@aim.com I for future annual report notificat	tion)
For further informati	on concerning this matter, please	call:	
Tonya Davis		at (614) 975-4452	2
(Name	e of Contact Person)	(Area Code & Daytim	e Telephone Number)
Enclosed is a check	for the following amount made pa	ayable 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)
Ame Divi P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Center ( Tallahassee, FL 32301	

## **Articles of Amendment**

United Ministries Church of Jacksonville Incorporateo

United Ministries Church of Jacksonville Incorporateo

44

8:44

#### N09000003255

(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:

The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company"			orporated" or the
B. Enter new principal office address, if ap		9802-12 Baymeado	ows Rd PMB15
(Principal office address <u>MUST BE A STREET ADDRE</u>		Jacksonville, FL 32256	
	_		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		9802-12 Baymeadows Rd PMB159	
		Jacksonville, FL 32	256
D. If amending the registered agent and/or new registered agent and/or the new reg			er the name of the
Name of New Registered Agent:	Pastor F	Roderick Williams	_
	9802-12 Bay	meadows Rd PMB 1	5.
New Registered Office Address:	(Flor	ida street address)	-0.5
	Ja	acksonville	_, Florida 32256
		(City)	(Zip Code)
	ning Dogistored A	Agent:	
New Registered Agent's Signature, if chang I hereby accept the appointment as register			ot the obligations of

Page 1 of 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
ØD	Delthia Waller	1746 San Marco Blvd Apt 3  Jacksonville, FL 32207	☐ Add ☐ Remove
ØD	Monique Murray	9802-12 Baymeadows Rd PMB	▲ Add Remove
			☐ Add ☐ Remove
	ing or adding additional Articles, ente ditional sheets, if necessary). (Be spec		•
<u></u>		<u> </u>	

The date of each amendmen	t(s) adoption: July 12; 2010
	(date of adoption is required)  July 12, 2010
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated	7/12/10
Signature	Rodeich William
hav	y the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	Pas
	(Title of person signing)