

FILED  
17 AUG 30 PM 1:23  
FBI - MEMPHIS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 23, 2017

CANTIS L WILLIAMS  
PENTECOSTAL OF FAITH HOST OF HEAVEN CHUR  
60 HARPER LANE  
QUINCY, FL 32351

SUBJECT: PENTECOSTAL OF FAITH HOST OF HEAVEN CHURCH OF  
CHRIST, INC.  
Ref. Number: N09000006999

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE COMPLETE THE ATTACHED PAGE 4 OF 4 AND RESUBMIT.

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) 245-6050.

Susan Tallent  
Regulatory Specialist II

Letter Number: 717A00017323

RECEIVED  
17 AUG 30 03 PM '17  
DIVISION OF CORPORATIONS  
FLORIDA DEPARTMENT OF STATE

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Pentecostal of Faith Host of Heaven Church of Christ, Inc.

DOCUMENT NUMBER: N09000006999

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

Please return all correspondence concerning this matter to the following:

Cantis L Williams

\_\_\_\_\_  
(Name of Contact Person)

Pentecostal of Faith Host of Heaven Church of Christ, Inc

\_\_\_\_\_  
(Firm/ Company)

60 Harper Lane

\_\_\_\_\_  
(Address)

Quincy Florida 32351

\_\_\_\_\_  
(City/ State and Zip Code)

hostofheavenchurch@gmail.com

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

For further information concerning this matter, please call:

Cantis L Williams

850

570-5690

at

\_\_\_\_\_  
(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:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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

Pentecostal of Faith Host of Heaven Church of Christ, Inc.

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

N09000006999

(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:**

Hosts of Heaven Church of Jesus Christ, Inc.

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**)

N/A

**C. Enter new mailing address, if applicable:**  
(Mailing address **MAY BE A POST OFFICE BOX**)

N/A

**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: N/A

(Florida street address)

New Registered Office Address:

N/A, Florida  
(City) (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

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:

|  |           |                    |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u>    |
| <input checked="" type="checkbox"/> Remove | <u>V</u>  | <u>Mike Jones</u>  |
| <input checked="" type="checkbox"/> Add    | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u><br>(Check One)       | <u>Title</u> | <u>Name</u>               | <u>Address</u>                             |
|--|--------------|---------------------------|--|
| 1) <input type="checkbox"/> Change         |              |                           |  |
| <input checked="" type="checkbox"/> Add    | <u>DT</u>    | <u>Gloria Jordan</u>      | <u>925 W CLARK ST. QUINCY FL 32351</u>     |
| <input checked="" type="checkbox"/> Remove | <u>DT</u>    | <u>LISA White</u>         | <u>429 N.W. ST. QUINCY FL 32351</u>        |
| 2) <input type="checkbox"/> Change         |              |                           |  |
| <input checked="" type="checkbox"/> Add    | <u>D</u>     | <u>Rubhy Eiggers</u>      | <u>1027 MLK BLVD. QUINCY FL 32351</u>      |
| <input checked="" type="checkbox"/> Remove | <u>D</u>     | <u>KRISTA D DAVIS</u>     | <u>3535 Roberts Ave TAL FL 32351</u>       |
| 3) <input type="checkbox"/> Change         |              |                           |  |
| <input checked="" type="checkbox"/> Add    | <u>DS</u>    | <u>MARY A Williams</u>    | <u>60 HARPER LANE QUINCY FL 32351</u>      |
| <input checked="" type="checkbox"/> Remove | <u>DS</u>    | <u>Bridgit A Williams</u> | <u>89 Betsey Lane QUINCY FL 32351</u>      |
| 4) <input type="checkbox"/> Change         |              |                           |  |
| <input checked="" type="checkbox"/> Add    | <u>D</u>     | <u>Charlene Hudson</u>    | <u>506 S. Cleveland St QUINCY FL 32351</u> |
| <input checked="" type="checkbox"/> Remove |              |                           |  |
| 5) <input type="checkbox"/> Change         |              |                           |  |
| <input type="checkbox"/> Add               |              |                           |  |
| <input type="checkbox"/> Remove            |              |                           |  |
| 6) <input type="checkbox"/> Change         |              |                           |  |
| <input 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)

N/A

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: July 19, 2017  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 July 19, 2017

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)

CANTIS Lee Williams  
(Typed or printed name of person signing)

Cantis Lee Williams DP  
(Title of person signing)