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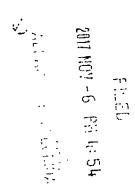
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C. GOLDEN NOV 0 8 2017

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: First Baptist Church West Jacksonvil
DOCUMENT NUMBER: NO900010601
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
First Baptist Church West Jacksonville
9912 MOORINGS Dr. (Address)
Jack Sonville, FL 32257 (City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
$\frac{JUJULarson}{(Name of Contact Person)} = \frac{904 - 394 - 6434}{(Area Code)} $ (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
235 Filing Fee U\$43.75 Filing Fee & U\$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)  Certificate of Status (Additional Copy is Enclosed)  S\$52.50 Filing Fee & Certificate of Status (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
First Bastist Ct	nurch luest Jacksonville, In Anthropology of State)
NOGCOU	
	ber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ition:
/ /	
name must be distinguishable and contain the word "corpore" Company" or "Co." may not be used in the name.	The new ation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	<i>\lambda'/F</i> \
(Principal office address <u>MUST_BE A STREET ADDRESS</u>	(I)
	<del></del>
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	Maria La Cl
	1092 Moorgate Ct. Jacksonville, FL 3225"
	Jacksonville, FL 3225"
D. If amending the registered agent and/or registered off	fice address in Florida, enter the name of the
new registered agent and/or the new registered office	
Name of New Registered Agent:	N/A
	·
	(Florida street address)
New Registered Office Address:	
	(City) , Florida (City)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered because the appointment as registered agent. I am for the company of	
i nereby accept the appointment as registered agent. I am j	summar with and accept the congations of the position.
/1	V/A
	Signature of New Registered Agent, if changing
	22

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		Doe 2 Jones 2 Smith		
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s
1) Change		Jerome		1036 Legay Ave.
Add Remove			-	Jacksonville, FL 32205
2) Change Add	<u>D</u>	Melanie	Nichols	7559 Taurus Cir.h Jackson Ville
Remove 3 ) Change				FL 3222
Add			-	
4) Change Add				· · · · · · · · · · · · · · · · · · ·
Remove			-	
5) Change Add Remove				
6) Change				
Add			-	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)			
	N/A		
<u> </u>			
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		<u> </u>	
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		<u> </u>	

The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Effective date <u>if applicable</u> : <u>November 1, 201</u>	
(no more than 90 days after amendmen	t file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of vote was/were sufficient for approval.	es cast for the amendment(s)
There are no members or members entitled to vote on the amendment(s). The adopted by the board of directors.	c amendment(s) was/were
Dated November 1, 2017	
Signature 1 Sugar Sugar	
(By the charman or vice chairman of the board, president of have not been selected, by an incorporator – if in the hand other court appointed fiduciary by that fiduciary)	
H. Eugene Hoda	<u>e5</u>
(1 ýped or printed name of pers	on signing)
President	
(Title of person sig	ning)