

116000009718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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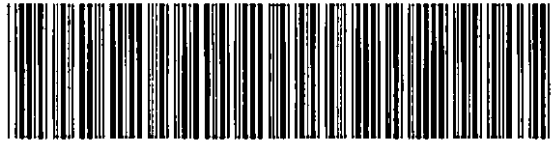
(Business Entity Name)

(Document Number)

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2018 JUL 26 PM 4:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 30 2018

11:00 AM

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FIRST COMMUNITY CHURCH OF GOD PSL, INC.

DOCUMENT NUMBER: N10000009718

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

Please return all correspondence concerning this matter to the following:

ANDREW MCDONALD

(Name of Contact Person)

FIRST COMMUNITY CHURCH OF GOD PSL, INC.

(Firm/ Company)

3280 SE QUAY STREET

(Address)

PORT SAINT LUCIE, FLORIDA 34984

(City/ State and Zip Code)

plawson466@gmail.com

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

For further information concerning this matter, please call:

DAVID MCDONALD

(Name of Contact Person)

917

at

607-6912

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

FIRST COMMUNITY CHURCH OF GOD PSL, INC.

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

N10000009718

(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)

6558 NW SELVITZ ROAD

PORT SAINT LUCIE, FLORIDA 34983

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

6032 NW TELFORD AVENUE

PORT SAINT LUCIE, FLORIDA 34983

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:

POLLIANA LAWSON

6032 NW TELFORD AVENUE

(Florida street address)

New Registered Office Address:

PORT SAINT LUCIE

(City)

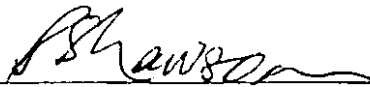
, Florida

34983

(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)

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> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>CP</u>	<u>DAVID N. MCDONALD</u>	<u>11 SHELLEY STREET</u> <u>FREEPORT, NY 11520</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>ANDREW M. MCDONALD</u>	<u>3280 SE QUAY STREET</u> <u>PORT SAINT LUCIE, FL 34983</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>TD</u>	<u>POLLIANA LAWSON</u>	<u>6032 NW TELFORD AVENUE</u> <u>PORT SAINT LUCIE, FL 34983</u>
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>SC</u>	<u>YVONNE GITTENS</u>	<u>562 SE KARRIGAN TERRACE</u> <u>PORT SAINT LUCIE, FL 34983</u>
5) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>CHARLES W. SMITH</u>	<u>787 SE ATLANTUS AVENUE</u> <u>PORT SAINT LUCIE, FL 34983</u>
6) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>LEO L. MCDONALD</u>	<u>3276 SE QUAY STREET</u> <u>PORT SAINT LUCIE, FL 34984</u>

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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u> </u> Change <u> X </u> <u> </u> Add <u> </u> Remove	<u> D </u>	<u>MARLENE MC CLURE-ALLEN</u>	<u>6940 NW DAFFODIL LANE</u> <u>PORT SAINT LUCIE, FL 34983</u>
2) <u> </u> Change <u> X </u> <u> </u> Add <u> </u> Remove	<u> D </u>	<u>GARCIA MCDONALD</u>	<u>3280 SE QUAY STREET</u> <u>PORT SAINT LUCIE, FL 34983</u>
3) <u> </u> Change <u> X </u> <u> </u> Add <u> </u> Remove	<u> D </u>	<u>MELVERN WEIR</u>	<u>10055 SW CARDIGAN CIRCLE</u> <u>PORT SAINT LUCIE, FL 34987</u>
4) <u> </u> Change <u> X </u> <u> </u> Add <u> </u> Remove	<u> D </u>	<u>ILEY PITT</u>	<u>562 SE KARRIGAN TERRACE</u> <u>PORT SAINT LUCIE, FL 34983</u>
5) <u> </u> Change <u> X </u> <u> </u> Add <u> </u> Remove	<u> D </u>	<u>PATRICIA WEIR</u>	<u>10055 SW CARDIGAN CIRCLE</u> <u>PORT SAINT LUCIE, FL 34987</u>
6) <u> </u> Change <u> X </u> <u> </u> Add <u> </u> Remove	<u> D </u>	<u>HAZEL E. MCDONALD</u>	<u>3276 SE QUAY STREET</u> <u>PORT SAINT LUCIE, FL 34984</u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

WE ARE AMENDING ARTICLE II - PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS.

WE ARE AMENDING ARTICLE VI - CHANGING TITLES AND ADDING DIRECTORS.

WE ARE AMENDING ARTICLE XI - NAME AND ADDRESS OF THE REGISTERED AGENT.

AMENDED ARTICLES OF INCORPORATION HAVE BEEN ATTACHED TO THIS DOCUMENT.

JULY 9, 2018

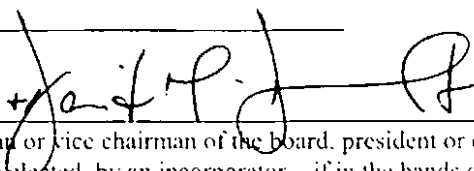
The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(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 7/9/18 _____
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)

DAVID MCDONALD

(Typed or printed name of person signing)

CHAIRMAN / PRESIDENT

(Title of person signing)

ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION

*The undersigned acting as incorporator(s) of a corporation pursuant to chapter 617,
Florida Statutes, adopt(s) the following Articles of Incorporation*

ARTICLE II

Principal place of business and mailing address

The principal place of business and mailing address for this corporation shall be:

6558 NW Selvitz Road
Port Saint Lucie, Florida 34983

The mailing address for this corporation shall be:

6032 NW Telford Avenue
Port Saint Lucie, Florida 34983

ARTICLE VI

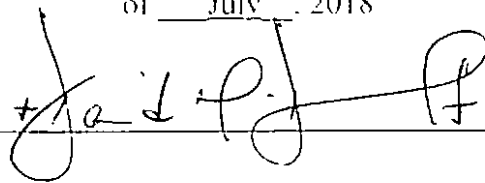
The Directors are appointed in accordance with Bylaws. The name and address of the persons appointed to act as the initial Directors of this Corporation are:

Name	Address
David N. McDonald / President	11 Shelley Street Freeport, NY 11520
Andrew M. McDonald / Vice President	3280 SE Quay Street Port Saint Lucie, FL 34984
Polliana Lawson / Treasurer	6032 NW Telford Avenue Port Saint Lucie, Florida 34983
Yvonne Gittens / Secretary	562 SE Karrigan Terrace Port Saint Lucie, Florida 34983
Leo L. McDonald	3276 SE Quay Street Port Saint Lucie, Florida 34984

Charles W. Smith	787 SE Atlantus Avenue Port Saint Lucie, Florida 34983
Hazel E. McDonald	3276 SE Quay Street Port Saint Lucie, Florida 34984
Melvorn Weir	10055 SW Cardigan Circle Port Saint Lucie, Florida 34987
Garcia McDonald	3280 SE Quay Street Port Saint Lucie, Florida 34984
Marlene McClure-Allen	6940 NW Daffodil Lane Port Saint Lucie, Florida 34983
Patricia Weir	10055 SW Cardigan Circle Port Saint Lucie, Florida 34987
Iley Pitt	562 SE Karrigan Terrace Port Saint Lucie, Florida 34983
Noel McDonald	513 Goldcoast Avenue Port Saint Lucie, Florida 34983

These amendments were adopted by the full Board of Directors this 9th day
of July, 2018

Signature



DAVID N. MCDONALD
(PRINTED NAME OF PERSON SIGNING)

CHAIRMAN / PRESIDENT
(TITLE OF PERSON SIGNING)

ARTICLE XI

The name and address of the registered agent is:

Polliana Lawson
6032 NW Telford Avenue
Port Saint Lucie, Florida 34983

Declaration:

The Duties and Responsibilities of the position of Registered Agent were explained to the person holding the position.

Certificate:

I hereby state that my Full and Correct name is Polliana Lawson and I hereby further state that the duties and responsibilities of the position were explained to me. I also further state that I agree to accept this position with the understanding that inclusive in the duties and function of this position is to accept the service of any legal documents whether it is private individuals, organizations or government agencies.

Executed this 18th day of July 2018.

By 
Polliana Lawson, *Registered Agent*