

N100000009718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

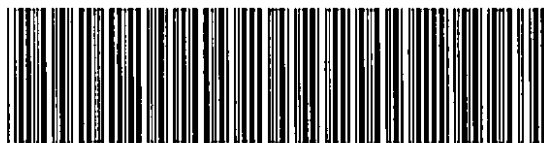
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

2.5.18

Office Use Only



200316131182

07/27/18--01024--002 \*\*52.30

FILED  
2018 JUL 27 PM 4:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Anund/CC  
CU17

AUG 01 2018  
ALBRITTON

**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

917 607-6912

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 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 checked="" 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

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))

FILED  
2018 JUL 27 PM 4:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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)

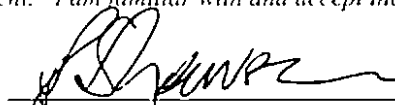
Florida

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

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>X</u> Change <u>      </u> Add <u>      </u> Remove	<u>CP</u>	<u>DAVID N. MCDONALD</u>	<u>11 SHELLEY STREET</u> <u>FREEPORT, NY 11520</u>
2) <u>      </u> Change <u>X</u> Add <u>      </u> Remove	<u>VP</u>	<u>ANDREW M. MCDONALD</u>	<u>3280 SE QUAY STREET</u> <u>PORT SAINT LUCIE, FL 34983</u>
3) <u>      </u> Change <u>X</u> Add <u>      </u> Remove	<u>TD</u>	<u>POLLIANA LAWSON</u>	<u>6032 NW TELFORD AVENUE</u> <u>PORT SAINT LUCIE, FL 34983</u>
4) <u>X</u> Change <u>      </u> Add <u>      </u> Remove	<u>SC</u>	<u>YVONNE GITTENS</u>	<u>562 SE KARRIGAN TERRACE</u> <u>PORT SAINT LUCIE, FL 34983</u>
5) <u>X</u> Change <u>      </u> Add <u>      </u> Remove	<u>D</u>	<u>CHARLES W. SMITH</u>	<u>787 SE ATLANTUS AVENUE</u> <u>PORT SAINT LUCIE, FL 34983</u>
6) <u>X</u> Change <u>      </u> Add <u>      </u> 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:

<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 type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>MARLENE MC CLURE-ALLEN</u>	<u>6940 NW DAFFODIL LANE</u> <u>PORT SAINT LUCIE, FL 34983</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>GARCIA 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>D</u>	<u>MELVERN WEIR</u>	<u>10055 SW CARDIGAN CIRCLE</u> <u>PORT SAINT LUCIE, FL 34987</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>ILEY PITT</u>	<u>562 SE KARRIGAN TERRACE</u> <u>PORT SAINT LUCIE, FL 34983</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>PATRICIA WEIR</u>	<u>10055 SW CARDIGAN CIRCLE</u> <u>PORT SAINT LUCIE, FL 34987</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>HAZEL E. MCDONALD</u>	<u>3276 SE QUAY STREET</u> <u>PORT SAINT LUCIE, FL 34984</u>

*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.*

<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>

Address

513 GOLDCOAST AVENUE

PORT SAINT LUCIE, FL 34983

---

\_\_\_\_\_

---

\_\_\_\_\_

---

10. *Journal of the American Medical Association*, 2000; 284: 1039-1044.

---

**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.

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**

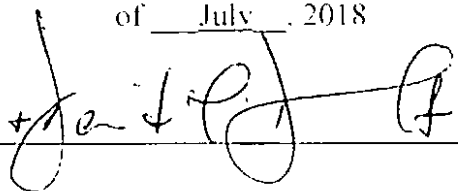
The Directors are appointed in accordance with Bylaws. The name and address of the persons appointed to act as the initial Directors of this Corporation are:

<b>Name</b>	<b>Address</b>
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
Melvem 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 18<sup>th</sup> day of July 2018.

By   
Polliana Lawson, *Registered Agent*

JULY 9, 2018

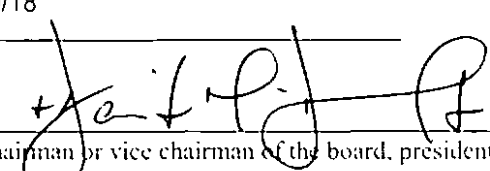
The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

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)