NII 0000 11537

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SEGRETZAY OF STATE

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TO: Amendment Section Division of Corporations	
Chapman Baldwin Walde	n Tucker Women's Missionary Society, Inc
N11000011537 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submittee	l for filing.
Please return all correspondence concerning this matter to t	he following:
Joan McKinnon	
(Nan	ne of Contact Person)
((Firm/ Company)
P. O. Box 10093	
	(Address)
Riviera Beach, FL 33404	
(City	/ State and Zip Code)
cbwtwms@gmail.com	
E-mail address: (to be used for f	uture annual report notification)
For further information concerning this matter, please call:	
Tammy James	561 249-6562
(Name of Contact Person)	atat(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable	e to the Florida Department of State:
Certificate of Status Ce (A	3.75 Filing Fee &S52.50 Filing Feecrtified CopyCertificate of Statusdditional copy isCertified Copyiclosed)(Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	<u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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2021 JAN 22 PM 4:11

SERRETARY OF STATE

Chapman Baldwin Walden Tucker Women's Missionary Society. Inc.

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(Name of Corporation as currently filed with the Florida Dept. of State) N11000011537

(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 "corp "Company" or "Co." may not be used in the name.	oration" or "incorporate	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	Joan McKinnon	
(Principal office address <u>MUST BE A STREET ADDRE</u>	(SSC) 4305 Evergreen Ave	enue
	Ft. Pierce, FL 34947	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	P. O. Box 10093	
	Riviera Beach, FL 3	3404
D. If amending the registered agent and/or registered	office address in Florid:	a, enter the name of the
new registered agent and/or the new registered offi-	ce address:	
Name of New Registered Agent:	ny James	
5047	Northern Lights Drive	
	(1	Florida street address)
<u>New Registered Office Address</u> :		
Green	lacres	. Florida <u>33463</u>
	(City)	(Zip Code)

<u>New Registered Agent's Signature, if changing Registered Agent:</u> *I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

Signature of Siey 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)

1

Pleasy note the officer/director title by the first letter of the office title:

 $P = President; V \neq V_i ce President; T = Treasurer; S \neq Secretary; D \neq Director; TR \neq Trustee; C = Chairman or Clerk; CEO = Chief$ Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officeheld. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doc is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally 5mith is named the V and S. These should be noted as John Doc. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: <u>X.</u> Change <u>X</u> R6move <u>X</u> Add	<u>PT</u> J <u>ohn L</u> ⊻ <u>Mike J</u> SV Sally S	Iones	
<u>Type of Action</u> (Check ()ne)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change Add	<u>р</u>	McKinnon, Joan	4305 Evergreen Avenue Ft. Pierce, FL 34947
$\frac{x}{2} Remove$ $\frac{2}{x} Change$ $\frac{x}{Add}$	<u>V</u>	Grant, Linda	Chanev, Brenda 817 2nd Street Riviera Beach, FL 33404
3) Remove Change Add Remove	<u>V</u>	Allen, Vonda	
4) Change Add	<u>s</u>	James, Tammy	5047 Northern Lights Drive Greenacres, FL 33404
× Remove			Cleare, Angela
57 Change Add			
Remove			
6) Change Add			
Remove			

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

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	s, this date will not be listed as the

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Adoption of Amendment(s) (CHECK ONE)

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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	01/17/2021
Durou	A
Signature	Kinnup trans.
÷	(By the chairman or vide 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
	have not been selected, by an incorporator $-$ if in the hands of a receiver, trustee, or
	other court appointed fiduciary by that fiduciary)

Tammy James

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(Typed or printed name of person signing)

Registered Agent / Sechelary . (Title of person signing)