

N130000006212

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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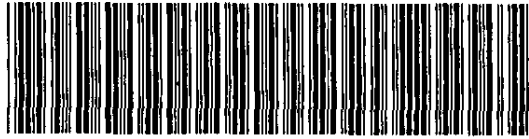
(Business Entity Name)

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*Amended*

FILED  
2013 OCT -7 PM 12:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*00789, 00524, 00671

*10/17/13*

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: IMMANUEL CUMBERLAND PRESBYTERIAN CHURCH, INC

DOCUMENT NUMBER: N13000006212

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

Please return all correspondence concerning this matter to the following:

**MARION E. REED**

(Name of Contact Person)

**IMMANUEL CUMBERLAND PRESBYTERIAN CHURCH, INC**

(Firm/ Company)

**10235 HGWY 301 S.**

(Address)

**DADE CITY, FL 33525**

(City/ State and Zip Code)

**INSTCHUCK12@EMBARQMAIL.COM**

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

For further information concerning this matter, please call:

**Marion E Reed**

(Name of Contact Person)

at **352 567-7427**

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 23, 2013

Marion E. Reed  
Immanuel Cumberland Presbyterian Church  
10235 Hwy 301 S.  
Dade City, FL 33525

SUBJECT: IMMANUEL CUMBERLAND PRESBYTERIAN CHURCH INC.  
Ref. Number: N13000006212

We have received your document for IMMANUEL CUMBERLAND PRESBYTERIAN CHURCH INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Dept of State does not file amendments to include publications. If you wish to amend your articles of incorporation you may do so by adding an article to your articles of incorporation that may be titled dissolution clause. Please include the wording that you wish to use in section E page 3 of the amendment form.

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.

Annette Ramsey  
Regulatory Specialist II

Letter Number: 013A00022304

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

IMMANUEL CUMBERLAND PRESBYTERIAN CHURCH, INC

2013 OCT -7 PM 12:44

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

N13000006212

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(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:**

NA

*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:**

NA

(Principal office address **MUST BE A STREET ADDRESS**)

**C. Enter new mailing address, if applicable:**

NA

(Mailing address **MAY BE A POST OFFICE BOX**)

**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:

NA

(Florida street address)

New Registered Office Address:

NA

(City)

Florida

(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> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	_____	<u>NA</u>	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input 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)

## ARTICLE VIX: DISSOLUTION CLAUSE

Upon dissolution of Immanuel Cumberland Presbyterian Church, Inc. assets shall be distributed for one or more exempt purposes within the meaning of section 501 (C)(3) of the Internal Revenue Code of 1986, or corresponding sections of any future Federal tax code, or shall be distributed to the Federal, state, or local government for public purpose. Any such assets not so disposed of shall be disposed by a court of competent jurisdiction of the county in which the principle office of the organization is then located, exclusively for such purposes.

The date of each amendment(s) adoption: 9/8/2013, if other than the date this document was signed.

Effective date if applicable: 9/8/2013  
(no more than 90 days after amendment file date)

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 9/8/2013

Signature Ernest Cook  
(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)

Ernest Cook  
(Typed or printed name of person signing)

Vice President  
(Title of person signing)