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Amend

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COVER LETTER

TO: Amendment Section

Division of Corporations' One Body Church of Christ, Inc. NAME OF CORPORATION: N14000002176 DOCUMENT NUMBER: _ 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) One Body Church of Christ, Inc. (Firm/ Company) P.O. Box 26362 (Address) Jacksonville, FL 32226 (City/ State and Zip Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lenorita Stroman (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of	
ONE Body Church of Christ Inc	<u></u>
(Name of Corporation as currently filed with the Florida Dept. of State)	
(Document Number of Corporation (if known)	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> add amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation:	opts the following
A. It amending name, enter the new name of the corporation.	
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "(The new
"Company" or "Co." may not be used in the name.	zorp. or inc.
D. Francisco de Constitucione de Constitución	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	. 18
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	A STATE OF THE STA
	13 13
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	2
new registered agent and/or the new registered office address:	Feb
Name of New Registered Agent:	上当、万
	Y
(Florida street address)	
New Registered Office Address:	
, Florida	
(City) (Zip Co	ode)
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 po	sition.
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: X Change X Remove X Add	PT John I V Mike S SV Sally S	<u>Iones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Beverly King	10624 Academy Park Dr
Add X Remove			Jacksonville, FL 32218
2) Change	VP	Vanessa Perkins	10263 Whispering Forest Dr. #604
X Add			Jacksonville, FL 32257
Remove	VP	Bobby King	10624 Academy Park Dr
3) Change Add			Jacksonville, FL 32218
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			••••
Remove		D 2 -64	

f amending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)
•	
	·

•	January 24, 2016	
The date of each amendment(s	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 document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not experiment of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.	
There are no members or madopted by the board of dis	nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors.	
January Dated	24, 2016	
s. D	Marita Man	
Signature //	chairman or vice chairman of the board, president or other officer-if directors	_
ĥave no	t been selected, by an incorporator – if in the hands of a receiver, trustee, or burt appointed fiduciary by that fiduciary)	
Lane	orita Stroman	
	(Typed or printed name of person signing)	
VP		
	(Title of person signing)	