

000314051520

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

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Amel

R. WHITE
JUL 10 2018

FILED
10 JUL -9 AM 9:18
STATE
OF FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Gloria Land Evangelistic Ministries, Inc
DOCUMENT NUMBER: 114000004169

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

Please return all correspondence concerning this matter to the following:

Nicole Essandoh
Name of Contact Person

Firm/ Company
302 St. Johns Bluff Rd. N.
Address

JACKSONVILLE FL 32225
City/ State and Zip Code

nicoleroberts.gem@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nicole Essandoh at (862) 368-4246
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 checked="" 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 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 8, 2018

NICOLE ESSANDOH
302 ST JOHNS BLUFF RD. N
JACKSONVILLE, FL 32225

SUBJECT: GLORYLAND EVANGELISTIC MINISTRIES, INC
Ref. Number: N14000004169

We have received your document for GLORYLAND EVANGELISTIC MINISTRIES, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Rebekah White
Regulatory Specialist II

Letter Number: 418A00011986

RECEIVED
19 JUL -9 PM 1:00
CLERK OF THE COURT
JANUARY 1999

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: GLORYLAND EVANGELISTIC MINISTRIES

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Nicole Essandoh

(Name of Contact Person)

(Firm/ Company)

302 St. Johns Bluff Rd. N.

(Address)

JACKSONVILLE FL. 32225

(City/ State and Zip Code)

nicoleroberts.gem@gmail.com

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

For further information concerning this matter, please call:

Nicole Essandoh

(Name of Contact Person)

at 862 368-4246

(Area Code) (Daytime Telephone Number)

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Certified Copy
(Additional Copy is
Enclosed) |
|--|--|---|--|

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Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED

10 JUL -9 AM 9:14

GLORYLAND EVANGELISTIC MINISTRIES STATE
(Name of Corporation as currently filed with the Florida Dept. of State)

(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)

302 St. Johns Bluff Rd. N.
JACKSONVILLE FL 32225

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

302 St. Johns Bluff Rd. N.
JACKSONVILLE FL 32225

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: JACOB ESSANDOH

302 St. Johns Bluff Rd. N.

(Florida street address)

New Registered Office Address:

JACKSONVILLE

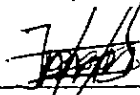
(City)

Florida 32225

(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 <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Humble P. Collins</u>	<u>6455 Argyle Forest Blvd.</u> <u>JACKSONVILLE FL 32244</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>Joyce T. Akyampong</u>	<u>12275 Franklin Brook Ln. S.</u> <u>JACKSONVILLE FL 32225</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>JANATU FOFONAH</u>	<u>4138 Clearbrook Cove Rd.</u> <u>JACKSONVILLE FL 32218</u>
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>PT</u>	<u>JACOB ESSANDOH</u>	<u>1164 Dawnlight Rd.</u> <u>JACKSONVILLE FL 32218</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VS</u>	<u>NICOLE ESSANDOH</u>	<u>1164 Dawnlight Rd.</u> <u>JACKSONVILLE FL 32218</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>TAMBA MOMORIE</u>	<u>4138 Clearbrook Cove Rd.</u> <u>JACKSONVILLE FL 32218</u>

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

N/A

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

Effective date if applicable: 5/29/18
(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)

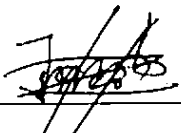
- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 7/6/18

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)

JACOB ESSANDOH
(Typed or printed name of person signing)

 PRESIDENT
(Title of person signing)