N1900011049

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TO: Amendment Section Division of Corporations

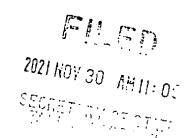
NAME OF CORPORATION:	resourg District AMEC Incorporated
N14000011049 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee a	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Rev. Dr. Patricia S. Wallace	
•	(Name of Contact Person)
The Tampa District AMEC Incorporated	
	(Firm/ Company)
1381 East Main Street	
	(Address)
Pahokee, Florida 33476	
	(City/ State and Zip Code)
Tremendoustampa@gmail.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter.	please call:
Rev. Dr. Patricia S. Wallace	561-261-622
(Name of Contact	
Enclosed is a check for the following amount r	nade payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of \$	
Mailing Address	Street Address

Mailing Address
Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address

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



THE ST-PETERSBURG DISTRICT AMEC INCORPORATED

(Name of Corporation as currently filed with th	e Florida l	Dept. of State)		
N14000011049				
(Docur	nent Numb	er of Corporation	(if known)	
Pursuant to the provisions of section 617,1006, Flo amendment(s) to its Articles of Incorporation:	orida Statut	es, this <i>Florida No</i>	ot For Profit Corpord	ation adopts the following
A. If amending name, enter the new name of th	e corporat	ion:		
THE TAMPA DISTRICT AMEC INCORPORATION	TED			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		tion" or "incorpo	rated" or the abbrevi	iation "Corp." or "Inc."
B. Enter new principal office address, if applica	able:	1381 East Main		
(Principal office address MUST BE A STREET A	IDDRESS	Pahokee, Florid	la 33476	
				·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	1381 East Mair	Street	
		Pahokee, Florid	a 33476	
D. If any ading the registered agent and/or regis	stand off	an address in Fla	elda antar tha nama	of the
D. If amending the registered agent and/or reginew registered agent and/or the new register			rida, enter the hame	or the
Name of New Registered Agent:	Rev. Dr.	Patricia S. Walla	ce	
name of the regime to Agent.	1381 Eas	st Main Street	· · · · · · · · · · · · · · · · · · ·	
	+		tFlorida street address;	1
<u>New Registered Office Address:</u>				
	Pahokee ————		I	Florida <u>33476</u>
		(City)		(Zip Code)
New Registered Agent's Signature, if changing l				
I hereby accept the appointment as registered agen	ıt. Lam fa	miliar with and ac	cept the obligations (of the position.
	Pa	Children.	, I Walla	ich.
-	- Ya	ignature of Neve Ri	rgistered Agent, if ch	anging

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 De V Mike Je SV Sally Se	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	VP	Williams, James v	1421 S. Madison Ave. Clearwater, Fl. 33756
X Remove			
2) Change Add	<u>VP</u>	Wallace, Joni Shenell	1831 MLK Boulevard Midway, FI
Remove Change Add Remove	SEC	Irby, Kenneth F	6149 27th Street South St. Petersburg, Fl 33712
4) Change Add	SEC	Wallace, Jeremy Franklin	1381 East Main Street Pahokee, Fl. 33476
Remove			
5) Change Add	<u>D</u>	Williams, Clarence A	108 Falling Water Drive Brandon, Fl. 33511
CX_Remove			
6) CX Change Add	<u>P</u>	Rev. Dr. Patricia S. Wallace	1381 East Main Street Pahokee, Florida 33476
Remove			
E. <u>If amending or addir</u> (attach additional shee		cles, enter change(s) here: (Be specific)	
			

		
		
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-		.
		<u>-</u>
The date of each amendment(s) adopti date this document was signed.	on:	_, if other than the
Effective date if applicable:		
<u></u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do document's effective date on the Department.	oes not meet the applicable statutory filing requirements, this date will not be nent of State's records.	oe listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte was/were sufficient for approval.	d by the members and the number of votes east for the amendment(s)	

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Dated	11-19-21
Signature	Rev Defaticio & Wallace
	(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)
	Rev. Dr. Patricia S. Wallace
	(Typed or printed name of person signing)

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were