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| Special instructions to | rilling Officer. | |
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Office Use Only

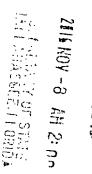


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C. CARROTHERS



COVER LETTER

TO: Amendment Section **Division of Corporations**

| NAME OF CORPORATION: Mt. Canaan Mission | onary Baptist Church, Inc. |
|--|---|
| N16000010499 | |
| DOCUMENT NUMBER: | |
| The enclosed Articles of Amendment and fee are su | bmitted for filing. |
| Please return all correspondence concerning this ma | tter to the following: |
| Rev. Dr. Jerone A. Gamble | |
| | (Name of Contact Person) |
| Mt. Canaan Missionary Baptist Church, Inc. | |
| | (Firm/ Company) |
| 848 SE 58th Avenue | |
| | (Address) |
| Ocala, Florida 34480 | |
| | (City/ State and Zip Code) |
| jagpray1@cfl.rr.com | |
| E-mail address: (to be us | ed for future annual report notification) |
| For further information concerning this matter, please | se call: |
| Rev. Dr. Jerone A. Gamble | 352 454-5720 at |
| (Name of Contact Perso | |
| Enclosed is a check for the following amount made | payable to the Florida Department of State: |
| \$35 Filing Fee \$\text{\$\text{\$\subset\$}\$ | \$\textsquare\textsquar |

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

Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as curren | tly filed with the Flo | rida Dept. of State) |
|--|-------------------------|--|
| N16000010499 | | |
| (Document Numb | er of Corporation (if I | known) |
| Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation: | | or Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corporat | <u>ion:</u> | |
| NA | | The new |
| name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name. | tion" or "incorporate | ed" or the abbreviation "Corp." or "Inc." |
| Fetou nove mineiral office address if applicable. | NA | |
| B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS |) | 22.2 |
| | | 2 2 2 2 |
| | | <u> </u> |
| | | المارات. (1) والمارات: |
| Enter new mailing address, if applicable: | NA | L0 S1 |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | | 5 <u>~</u> |
| | | . |
| | | |
| | | |
| If amending the registered agent and/or registered offi- new registered agent and/or the new registered office a | | , enter the name of the |
| Name of New Registered Agent: | each one | |
| Name of New Registered Agen. | | |
| | (1 | Florida street address) |
| New Registered Office Address: | | |
| | | , Florida |
| *************************************** | (City) | (Zip Code) |
| iew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa | | ot the obligations of the position. |
| | ignature of New Regi | stered 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 Do V Mike Jo SV Sally Sr | ones | |
|----------------------------------|--|--------------|---------|
| Type of Action (Check One) | Title | Name | Address |
| 1) Change | | ···· | |
| Add | | | |
| 2) Change | | | |
| Add | | | |
| 3) Change Add | | | |
| Remove | | · | |
| 4) Change Add | | | |
| Remove | | | |
| 5) Change Add | | | |
| Remove | | | |
| 6) Change | | | |
| Remove | | | |

| (attach additional sheets, if necessary). (Be specific) | |
|---|--------------------|
| Add Article VI LIMITATIONS AND DISSOLUTION | |
| This Corporation shall not participate in or support any political party, political activity, or political candid | ate. |
| | |
| In its membership and other relationships, Mt. Canaan Missionary Baptist Church, Inc. will not discrimina | te on the basis |
| of race, ethnicity, or national origin. All who are a part of this body may receive the Word of God and the | teachings |
| of the Lord Jesus Christ and participate in the life of this Church; and such participation shall not disrupt the | ne harmony of |
| congregational life and substaintially held religious beliefs. | |
| • | |
| In the event that this Church shall ever cease to exist, upon dissolution, liquidation and winding-up of the | Corporation, |
| the officers shall, after paying or making provisions for the payment of all of the liabilities of the Corportion | on, dispose of all |
| of the assests of the Corporation to the Second Bethlehem Baptist Association or the Florida General Bapti | ist Convention, |
| Incorporated, organizations operated exclusively for charitable, educational, and religious purposes, and as | shall at the time |
| qualify as an exempt organization under Section 501 (C) or 501 (C) (3) of the Internal Revenue Code of 19 | 954 as amended, |
| as the officers may determine. | |
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| | e date of each amendment(s) adoption: e this document was signed. | if other than the |
|-----|--|-------------------|
| Eff | October 27, 2016 ective date if applicable: | |
| | (no more than 90 days after amendment file date) | |
| | te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be turnent's effective date on the Department of State's records. | listed as the |
| Ado | option 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 November 5, 2016 | |
| | Signature ble | |
| | (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) | |
| | JERONE GAMBLE | |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form for filing Articles of Amendment to amend the articles of incorporation of a Florida Not for Profit Corporation pursuant to section 617.1006, Florida Statutes. This is a basic amendment form and may not satisfy all statutory requirements for amending.

A corporation can amend or add as many articles as necessary in one amendment.

- > The original incorporators cannot be amended.
- If amending the name of the corporation, the new name must be distinguishable on the records of the Florida Department of State. A preliminary search for name availability can be made through the Division's website at www.sunbiz.org. You are responsible for any name infringement that may result from your corporate name selection.
- > If amending the registered agent, the new agent must sign accepting the appointment and state that he/she is familiar with the obligations of the position.
- > If amending/adding officers/directors, list titles and addresses for each officer/director.

If a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

The document must be typed or printed and must be legible.

Pursuant to section 617.0123, Florida Statutes, a delayed effective date may be specified but may not be later than the 90th day after the date on which the document is filed.

Filing Fee \$35.00 (Includes a letter of acknowledgment)

Certified Copy (optional) \$8.75

Certificate of Status (optional) \$8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

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

For further information you may call the Amendment Section at (850) 245-6050

CR2E009 (4/15)