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SEGNE GARRY A CARRELL
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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: SEMORAN BAPTIST TEMPLE INC DOCUMENT NUMBER: N16067 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Firm/ Company) 2051 W LESTER ROAD Apopka, FZ 32712 (City/ State and Zip Code) 5BABJULY29 @ MSN, com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407) 792 - 8435 STEVEN BENSON
(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 Certified Copy Certificate of Status (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



November 16, 2017

STEVEN BENSON 2051 W. LESTER ROAD APOPKA, FL 32712

SUBJECT: SEMORAN BAPTIST TEMPLE INC.

Ref. Number: N16067

We have received your document for SEMORAN BAPTIST TEMPLE 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.

Irene Albritton Regulatory Specialist II

Letter Number: 017A00023287



Articles of Amendment

to

Articles of Incorporation

of

	EMBRAN	BAPI	15/	/ 70	nper	INC.		
			is currently	y filed with t	the Florida De	pt. of State)		
	N/4	0067			4141			<u>_</u>
		(Docume	nt Number	of Corporati	on (if known)			
	visions of section 61 Articles of Incorpor		Ja Statutes,	this <i>Florida</i>	Not For Profit	t Corporation ac	lopts the f	ollowing
A. <u>If amending na</u>	ame, enter the new i	name of the o	corporatio	<u>n:</u>				
						· ·		The new
	nguishable and conta o." may <mark>not be use</mark> d		"corporatio	n" or "incoi	rporated" or th	e abbreviation '	"Corp." o	r "Inc."
	icipal office address Idress MUST BE A					 .		
rmcipai ojjice aa	iaress <u>brost be A</u>	STACET AD	<u>DKC33</u>) _	_				
			-					
	iling address, if app							
(Mailing addre	ss <u>May Be a Post</u>	<u> OFFICE B</u>	<u>0X</u>) _					-22
							<u> </u>	<u> </u>
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			-		·· - · ·	•	14:13	_ ;
	e registered agent a				lorida, enter t	the name of the	: <u>:</u>	<u>_</u> o [
new registered	agent and/or the n	ew registered			0 -		E.	ال ال (الم
<u>A'</u>	ame of New Register	red Agent:	3 T	さんそろ	BE!	NSON	<u> </u>	
			2051	W	BE1 LEST	ER RA	15	№
		_			(Florida str	eet address)		
i	New Registered Offic	<u>ce Address</u> :	,	1			7 a	
		_		POPKA		, Florida		17/2
			· •	(City)		Œip C	(ode)	
New Registered As	gent's Signature, if	changing Re	gistered A	gent:				
hereby accept the	appoiniment as regi	stered agent.	I am fami	liar with and	l accept the obl	igations of the p	osition.	
			. <u>.</u>		<u>. </u>			
			Sigi	nature of Nev	c Registered Aş	gent, 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 J. SV Sally S.	<u>lones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change	PD	JAJON M HENDERSON	10 w. orande Street Aposta, F2 32703
Add _ X_ Remove			Apopta, F2 32703
2) Change	Drictor	Judy A HENDERSON	40 W CRANGE Spret
Add Remove			Apopta, re 32703
3) Change Add			
Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change			
Remove			

. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
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The date of each amendment(s) addate this document was signed.	option: NOVEN	390 7 th	2017	, if other than the
Effective date <u>if applicable</u> :	Mov4 M3 W (no more than 90 day)	/ /	2017 file date)	
Note: If the date inserted in this bloc document's effective date on the Dep		ble statutory filing	requirements, this date wil	I not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
The amendment(s) was/were ad- was/were sufficient for approva	•	he number of votes	cast for the amendment(s)	ı
 There are no members or memb adopted by the board of directo 		mendment(s). The a	amendment(s) was/were	
Dated	17/17			
Signature Sh	W But			
have not bee	nan or vice chairman of the n selected, by an incorporat ppointed fiduciary by that fi	or – if in the hands		
57	ZVEV W B (Typed or pri	ENSON I		
	(Typed or pri	nted name of persor	n signing)	
		JASIDEN		
	Τ)	itle of person signi	ng)	