## N170000000408

| (Requestor's Name)                      |  |  |  |
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| PICK-UP WAIT MAIL                       |  |  |  |
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| (Business Entity Name)                  |  |  |  |
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| (Document Number)                       |  |  |  |
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| Certified Copies Certificates of Status |  |  |  |
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| Special Instructions to Filing Officer: |  |  |  |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION: Walk By Faith Missionary Baptist Church, I                                   |
|---|
| DOCUMENT NUMBER: N 17 00000408  |
| The enclosed Articles of Amendment and fee are submitted for filing.                              |
| Please return all correspondence concerning this matter to the following:                         |
| Cornell Denson (Name of Contact Person)   |
| (Name of Contact Person)  |
| Walk By Faith Missionary Baptist Church, Inc (Firm/ Company)                                      |
| 6133 NW 33rd Ter (Address)  |
| Gamesville FL 32653 (City/ State and Zip Code)  |
|   |
| Marilyndenson550 yahoo.com E-mail address: (to be used for future annual report notification)     |
| For further information concerning this matter, please call:                                      |
| Cornell Denson at (904) 405-8774  (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:     |
| \$35 Filing Fee  U\$43.75 Filing Fee & U\$43.75 Filing Fee & Certificate of Status                |
| Mailing Address Street Address  |

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

to
Articles of Incorporation of

| Local Bratath M   | Sinar                            | Douptist Unur                         |
|---|----------------------------------|---------------------------------------|
| (Name of Corporation as current   | ly filed with the Florida        | Dept. of State)                       |
| N17000  | 0004018 HAY                      | 110 A 1: 95                           |
| (Document Number  | er of Corporation (if know       | vn)                                   |
| Pursuant to the provisions of section 617.1006, Florida Statutes  | \$1555.0<br>13 (4) 14 (4)        | ARC (4) 50 5 6 5<br>ACCECA ST CENTA   |
| Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation: | i, this <i>Piorida:Not-Por-P</i> | roju-corporation adopts the following |
| A. If amending name, enter the new name of the corporation  | on:                              |                                       |
| N/A   |                                  | <i>Th.</i>                            |
| name must be distinguishable and contain the word "corporate  | ion" or "incorporated"           | or the abbreviation "Corp." or "Inc." |
| "Company" or "Co." may not be used in the name.   |                                  |                                       |
| D. P  | NIA                              |                                       |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)       | 1417                             |                                       |
| ,   |                                  |                                       |
|   |                                  |                                       |
|   | <del></del>                      |                                       |
| C. Enter new mailing address, if applicable:  | NIA                              |                                       |
| (Mailing address MAY BE A POST OFFICE BOX)  | NIA                              |                                       |
|   |                                  |                                       |
|   |                                  | <del></del>                           |
|   | <del></del>                      |                                       |
| D. If amending the registered agent and/or registered offic   | e address in Florida, er         | iter the name of the                  |
| new registered agent and/or the new registered office a   | ddress:                          |                                       |
| Name of New Registered Agent:   | NIA                              |                                       |
| nume of the negligible rigem.   | <del>-</del>                     |                                       |
| <del></del>   | /Flow                            | da street address)                    |
| New Registered Office Address:  | (1.10/1                          | aa sireei aaaressy                    |
|   |                                  | 541.1                                 |
|   | (City)                           | , Florida<br>(Zip Code)               |
| ·   | (City)                           | (Elp Cour)                            |
| New Registered Agent's Signature, if changing Registered  |                                  |                                       |
| I hereby accept the appointment as registered agent. I am fai   | niliar with and accept th        | e obligations of the position.        |
|   | . 1 <i>[</i> A                   |                                       |
|   | onature of New Register          |                                       |
| Şi  | anature of New Register          | ed 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 = Chairmon 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 |              | Doe<br>Jones<br>Smith |   |
|----------------------------------|--------------|-----------------------|---|
| Type of Action<br>(Check One)    | <u>Title</u> | <u>Name</u>           | <u>Addres</u> s                           |
| I) Change                        | P            | Cornell Denson        | 6133NW33rd Ter<br>Cainesville FL 32653    |
| Remove                           |              |                       |   |
| 2) Change                        | TR           | Rosetta McCaskill     | 805 NE 26th Ter<br>Coainesville FL 32641  |
| Remove 3) Change Add             | TR           | Lawrence Chatman      | 924 NE 20th Place<br>Gainesville FL 32609 |
| Remove 4) Change Add             | <u>T</u>     | Deborah Brandon       | 720 NW9thSt<br>Cainesville FC32601        |
| Change  Add                      | VC           | Marilyn Denson        | 6133 NW 33rd Ter<br>Cainesville FC 32653  |
| Remove  6) Change  Add Remove    | <u>C</u>     | Janet Gilbert         | 6133 NW 33rd Ter<br>Camesville FL 321653  |

| E. If amending or adding additional Articles, enter change(s) here: |  |
|---|--|
| (attach additional sheets, if necessary). (Be specific)             |  |
| NA  |  |
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| The date of each amendment(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: It the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.   | will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE)   |                           |
| The amendment(s) was/were adopted by the members and the number of votes cast for the amendment was/were sufficient for approval.  | ı(s)                      |
| There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.   | 2                         |
| Dated 5/1/19 Signature Cancer To Stable of Sta |                           |
| Signature Communication of State of Sta |                           |
| (By the chairman or vice chairman of the board, president or other officer-if directo have not been selected, by an incorporator – if in the hands of a receiver, trustee, o other court appointed fiduciary by that fiduciary)  |                           |
| Cornell Denson   | _                         |
| (Typed or printed name of person signing)  |                           |
| President (Title of person signing)  | -                         |