

N21021

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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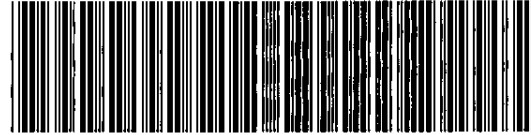
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMEND
PBB/17

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: JUST FOR THE LOVE OF JESUS MINISTRIES, INC.

DOCUMENT NUMBER: N21021

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

Please return all correspondence concerning this matter to the following:

ELIZABETH CHARLENE OSTRANDER

(Name of Contact Person)

JUST FOR THE LOVE OF JESUS MINISTRIES, INC.

(Firm/ Company)

P.O. BOX 1597

(Address)

CALLAHAN, FLORIDA 32011

(City/ State and Zip Code)

ELIZABETHCO@WINDSTREAM.NET

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

For further information concerning this matter, please call:

ELIZABETH CHARLENE OSTRANDER

at (904) 879-6404

(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

☐ \$43.75 Filing Fee &
Certificate of Status

☒ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$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

RECEIVED

11 APR 22 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 25, 2011

ELIZABETH CHARLENE OSTRANDER
JUST FOR THE LOVE OF JESUS MINISTRIES
PO BOX 1597
CALLAHAN, FL 32011

SUBJECT: JUST FOR THE LOVE OF JESUS MINISTRIES, INC.
Ref. Number: N21021

We have received your document for JUST FOR THE LOVE OF JESUS MINISTRIES, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$43.75.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 511A00009919

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
11 JUN 16 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

JUST FOR THE LOVE OF JESUS MINISTRIES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N21021

(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)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P. O. Box 1597

Callahan, Florida 32011

U.S.A.

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:

ELIZABETH CHARLENE OSTRAND

45101 BLESSED WAY

New Registered Office Address:

(Florida street address)

CALLAHAN

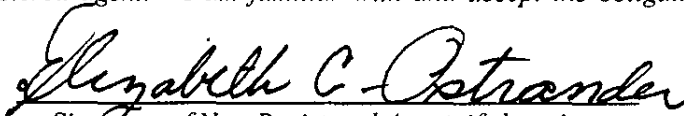
(City)

Florida 32011

(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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
V. P.	ELIZABETH C. OSTRANDER	45101 BLESSED WAY CALLAHAN, FLORIDA 32011	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
V.P.	SHEILA M. FRENCH	PO Box 182 3753 french PL Hilliard FL 32046	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

V P Sheila M French

The date of each amendment(s) adoption: 4/18/2011

(date of adoption is required)

Effective date if applicable: 4/18/2011

(no more than 90 days after amendment file date)

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 4/18/2011

Signature Elizabeth C. Ostrander
(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)

ELIZABETH CHARLENE OSTRANDER

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)