N 38257

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COVER LETTER

TO: Amendment Section Division of Corporation	ons				
NAME OF CORPORAT	Tabernacle Mission	nary Baptist Church	of St. Augustin	e, Inc.	
DOCUMENT NUMBER:	#N38257				_
The enclosed Articles of Ar	mendment and fee are sub	mitted for filing.			
Please return all correspond	lence concerning this matt	er to the following	:		
Shirley A. Garvin					
		(Name of Contact	Person)		_
Tabernacle Missionary Bar	otist Church				
hee of Business; 280 Duval Street		(Firm/ Company) (Firm/ Company) (Address)	uny) Ng Address Box 368	s: 33 ST. Augustine, FL	-32685
St. Augustine, FL 32084					
		(City/ State and Zi	p Code)		_
tabernacle-mbc@att.net					
Ţ	-mail address: (to be used	for future annual	report notificatio	n)	-
For further information con-	cerning this matter, please	call:			
Shirley A. Garvin			904	377-8121	
	(Name of Contact Person		(Area Code)	(Daytime Telephone Number)	-
Enclosed is a check for the f	ollowing amount made pa	yable to the Florid	a Department of	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fe Certified Copy (Additional copy enclosed)	Certif v is Certif	0 Filing Fee icate of Status icd Copy tional Copy is osed)	
	nt Section f Corporations	, C	treet Address Amendment Section Division of Corpo The Centre of T	orations	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

Tabernacle Missionary Baptist Church of St. Augustine, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)			
#N38257			
(Document Number	er of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:			
A. If amending name, enter the new name of the corporati	ion:		
		The new	
name must be distinguishable and contain the word "corporat "Company" or "Co," may not be used in the name.	ion" or "incorporated" or the abl	•	
B. Enter new principal office address, if applicable:		25.3	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			
		2071 P. 7. 27 P. 1. 21 1. 5	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		22	
(Maning address MATERIAL OST OFFICE DON)			
		<u></u> ග	
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office ac	e address in Florida, enter the n Idress:	ame of the	
Name of New Registered Agent:			
	-		
	(Florida street ada	J., 1	
New Registered Office Address:	(ranaa sireet aas	u ess)	
		Florida	
	(City)	(Zip Code)	
New Degistered Agent's Signature if sharping Decistered	å4.		
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam	Agent: niliar with and accept the obligation	ons of the position.	
Sig	nature of New Registered Agent, i	fchanging	

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) × Change Add	<u>VC</u>	Clinton Scottie Gadson	7958 Vivera Court Jacksonville, FL 32244
Remove			
2) × Change Add	<u>FS</u>	Sophia Christinabernic Calloway	1431 Masters Dr. Lot 3 St. Augustine, FL 32084-2652
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or adding (attach additional sheet	g additional Artic s, if necessary).	cles, enter change(s) here: (Be specific)	
	-		

Effective date <u>if applicable</u> :	(no more than 90 d	avs after amondmo	nt file date)	-
The date of each amendment(s) adoption late this document was signed.	n:	<u></u>		, if other than th
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document's effective date on the Department of State's records.

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.

Dated	December 17, 2021
Signatu	
	(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)
	Shirley A. Garvin
	(Typed or printed name of person signing)
	(1) ped of printed fame of person signing)
	Treasurer