

N41305

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(Address)

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2022 AUG 18 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FL

2022 AUG 18 PM 3:08
J. HORNE

20

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MT. MORIAH MISSIONARY BAPTIST CHURCH OF OCALA, INC.

DOCUMENT NUMBER: N41305

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

Please return all correspondence concerning this matter to the following:

CLAUDETTE PRESTON

(Name of Contact Person)

MT. MORIAH MISSIONARY BAPTIST CHURCH OF OCALA, INC.

(Firm/ Company)

P.O. BOX 2883

(Address)

OCALA, FLORIDA 34478

(City/ State and Zip Code)

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

For further information concerning this matter, please call:

CLAUDETTE PRESTON

(Name of Contact Person)

352

at

629-3782

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

FILED

2022 AUG 18 PM 3:

MT. MORIAH MISSIONARY BAPTIST CHURCH OF OCALA, INC.

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N41305

(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:

N/A

name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp."
"Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

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:

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

(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)

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

| Type of Action (Check One) | Title | Name | Address |
|-------------------------------|--------|-----------------------------|-----------------------------|
| 1) <u> </u> Change | TRUSTI | OSCAR BROWN | 2810 N.W. MARTIN L. KING DR |
| <u> </u> Add | | | OCALA, FLORIDA 34475 |
| <u>X</u> Remove | | | |
| 2) <u> </u> Change | VC | EDMOND FORDHAM | 1711 NW 18TH AVENUE |
| <u> </u> Add | | | OCALA, FLORIDA 34475 |
| <u>X</u> Remove | | | |
| 3) <u>X</u> Change | D/CFO | FRANK WASHINGTON JR. | PO BOX 2883 |
| <u> </u> Add | | | OCALA, FLORIDA 34478 |
| <u> </u> Remove | | | |
| 4) <u>X</u> Change | D/CEO | JOHN LIVINGSTON | PO BOX 2883 |
| <u> </u> Add | | | OCALA, FLORIDA 34478 |
| <u> </u> Remove | | | |
| 5) <u> </u> Change | D/P | DR. JERRY B. ALEXANDER, JR. | PO BOX 2883 |
| <u>X</u> Add | | | OCALA, FLORIDA 34478 |
| <u> </u> Remove | | | |
| 6) <u> </u> Change | D | MARION LENON | PO BOX 2883 |
| <u>X</u> Add | | | OCALA, FLORIDA 34478 |
| <u> </u> Remove | | | |

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:

☒ Change PT John Doe

☐ Remove V Mike Jones

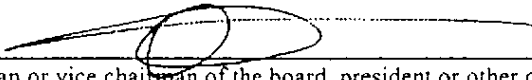
☐ Add SV Sally Smith

| Type of Action (Check One) | Title | Name | Address |
|---|----------|-------------------------|-----------------------------|
| 1) <input type="checkbox"/> Change | <u>S</u> | <u>DESSIE V. TURNER</u> | <u>PO BOX 2883</u> |
| <input checked="" type="checkbox"/> Add | | | <u>OCALA, FLORIDA 34478</u> |
| <input type="checkbox"/> Remove | | | |
| 2) <input type="checkbox"/> Change | <u>D</u> | <u>VINCE JONES</u> | <u>PO BOX 2883</u> |
| <input checked="" type="checkbox"/> Add | | | <u>OCALA, FLORIDA 34478</u> |
| <input type="checkbox"/> Remove | | | |
| 3) <input type="checkbox"/> Change | <u>D</u> | <u>DON PEYTON</u> | <u>PO BOX 2883</u> |
| <input checked="" type="checkbox"/> Add | | | <u>OCALA, FLORIDA 34478</u> |
| <input type="checkbox"/> Remove | | | |
| 4) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 5) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |
| 6) <input type="checkbox"/> Change | | | |
| <input type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove | | | |

☐ 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 08-18-22

Signature 
(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)

Jerry B. Alexander Jr
(Typed or printed name of person signing)

President / Pastor
(Title of person signing)