## NU17168

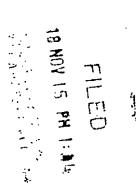
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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION: New Salem Missionary Baptist Chur of Tampa, Inc.
DOCUMENT NUMBER: N47108
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rufus Spencer (Name of Contact Person)
New Salem Missionary Baptist Church Of Tampa, In
8525 N. 78th Street
Temple Terrace FL 33U37 (City/State and Zip Code)
<u>Newsalem a) vex zw. net</u> E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dayna Hooks  (Name of Contact Person)  at 813-716-1115.  (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  S43.75 Filing Fee Certified Copy (Additional Copy is Enclosed)
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

New Salem Missiona	ry Baptist Chui	rch of Jampa, I
(Name of Corporation as current	ly filed with the Florida Dept. of Sta	<u>te</u> )
Degument Number	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corpora	ation adopts the following
A. If amending name, enter the new name of the corporation	on:	
NIA		The new
name must be distinguishable and contain the word "corporate "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbrevi	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NIA	
•		
C. Enter new mailing address, if applicable:	4.1 n	<u> </u>
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	NIH	
		5 [
D. If amending the registered agent and/or registered office	and durant in Florida, and another an area	-641-
new registered agent and/or the new registered office ac		or the
Name of New Registered Agent: Ruf	us Spencer	
853	OS NITRTH S	treet
	(Florida street address,	)
New Registered Office Address:	Na Taxcaa	221,27
<u>iem</u>	Ple Terrace	Florida 330 3 1
		(m) code)
New Registered Agent's Signature, if changing Registered a large l		of the position.
		<del></del>
( Su	znahure of New Registered Agent, if ch	anging

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 <math>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 D V Mike John SV Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	D		1047 Seminole SKy Dr Ruskin FL 33570
2) Change Add Remove	<u>C.F.O</u> .		704 Grand Canyon Drive Valaico FL 33594
4) Change Add			
Remove  5) Change Add			
Remove 6) Change Add			
Damova			

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

The date of each amendment(s) adoption: Oct 18 date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	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(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 11 NW 18	
Signature Dayna Hoons	
(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)	
Dayna Hooks (Typed or printed name of person signing)	
(1 yped or printed name of person signing)	
Treasurer.	
(Title of person signing)	