N94000002743



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Beacon Baptist Mini		c, Florida,	Inc.	
DOCUMENT NUMBER:	N94000002743				
The enclosed Articles of Am	nendment and fee are sub	mitted for filing.			
Please return all corresponde	ence concerning this matt	er to the following	:		
Sr. Pastor Lucian J. Gandoli	ro .				
		(Name of Contact	Person)		
Beacon Baptist Church					
		(Firm/ Comp	any)	 _ 	
3185 Aurora Rd.					_
		(Address)		
Melbourne, FL 32934					
		(City/ State and Z	ip Code)		
beaconbaptistmelbourne@g	mail.com				
E	-mail address: (to be use	d for future annual	report not	ification)
For further information con-	erning this matter, please	e call:			
Lucian J. Gandolfo			484 at		903-8301
	(Name of Contact Persor	n)		Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made p	ayable to the Flori	da Departn	nent of	State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing F Certified Copy (Additional copenclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

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

•

Beacon Baptist Ministries of Melbourne, Florida, Inc.				
(Name of Corporation as currently filed with the Florida	Dept. of State)			
N94000002743				
(Document Number of Corporation (if known)				
Pursuant to the provisions of section 617.1006, Florida Statt amendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not i</i>	For Profit Corporation adopts the foll	owing	
A. If amending name, enter the new name of the corpor	ation:			
N/A		Th	e new	
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.		ed" or the abbreviation "Corp." or ".	Inc."	
B. Enter new principal office address, if applicable:	N/A			
(Principal office address MUST BE A STREET ADDRES	<u>(S</u>)	;		
C. Enter new mailing address, if applicable:	N/A	· · · · · · · · · · · · · · · · · · ·		
(Mailing address MAY BE A POST OFFICE BOX)	·			
			$\dot{\cdot}$	
			<u>:</u>	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	ffice address in Florid e address:	ia, enter the name of the		
NI/A	adultios.			
Name of New Registered Agent: NIR				
		COLUMN AND AND AND AND AND AND AND AND AND AN		
New Registered Office Address:		(Florida street address)		
to be the transfer of the transfer		Marido		
 ,	(City)	, Florida (Zip Code)		
		. , .		
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	ed Agent: familiar with and acco	ept the obligations of the position.		
	Signature of New Reg	istered 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 X Remove X Add	PT John Do V Mike Jo SV Sally Si	ones	
Type of Action (Check Onc)	Title	<u>Name</u>	<u>∆ddreş</u> s
1) × Change Add	<u>P</u>	Martin Rector	3868 Beechgrove Rd. Melbourne, Fl. 32934
Remove 2) × Change Add	<u>v</u>	Steve Johnson	2306 Misty Way Lane Melbourne, FL 32935
Remove 3) × Change Add Remove	<u>s</u>	Virginia Chamberlain	161 Katherine Blvd. Melbourne, Ft. 32904
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or additional she See Attached (24 pages)	ng additional Art ets, if necessary).	ticles, enter change(s) here: (Be specific)	

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my to a Control of the control of th	09/29/2024					, if other	than the
The date of each amendment(s) adoption date this document was signed.						= - · · · · · · ·	
AAAAAAAAA							
Effective date if applicable:	no more than 90						
Note: If the date inserted in this block document's effective date on the Department	s not meet the ap	plicable statu	tory filing rec	qui re ments,	this date will	not be listed a	s the

(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.

Adoption of Amendment(s)

- •	oard of directors. 09/29/2024
Dated	- A
Signature	(ucion) (andogo
	(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)
	Lucian J. Gandolfo
	Edelat J. Ostaono
	(Typed or printed name of person signing)

(Title of person signing)