## N9SOCCO27

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Philippi E	Baptist Chur	ch Cemeter	y Ass
DOCUMENT NUMBER: N9500002	2027		<del> </del>
The enclosed Articles of Amendment and fee are sub	omitted for filing.		
Please return all correspondence concerning this matt	ter to the following:		
Alice Kinsey			, 6°3
· · · · · · · · · · · · · · · · · · ·	(Name of Contact Perso	n)	
	(Firm/ Company)		<del></del>
184 SE Grassland Terra	ace		
<del></del>	(Address)		
Lake City, FL 32024			.`
	(City/ State and Zip Cod	e)	<u></u>
E-mail address: (to be use	d for future annual report	notification)	
For further information concerning this matter, please	e call;		
Alice Kinsey	<sub>at</sub> 386	365-2565	
(Name of Contact Person)	(Area C	ode & Daytime Telephone	Number)
Enclosed is a check for the following amount made p	ayable to the Florida Depa	artment of State:	
S35 Filing Fee U\$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	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)		
N9500002027		
(Document Number of Corporation (if known)		
ursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Prof	it Corporation adopts the following	Ŗ
mendment(s) to its Articles of incorporation.		
. If amending name, enter the new name of the corporation:		
	The nev	11'
name must be distinguishable and contain the word "corporation" or "incorporated" or	he abbreviation "Corp." or "Inc.	
company" or "Co," may not be used in the name.	ريدر دست	
	<u> </u>	
B. Enter new principal office address, if applicable:	-	
B. Enter new principal office address MUST BE A STREET ADDRESS )  (Principal office address MUST BE A STREET ADDRESS)		
	=	
	1,	
av danse if applicable.		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(Matting uturess Mills See See See See See See See See See Se	7: UI	
	or the name of the	
D. If amending the registered agent and/or registered office address in Florida, ent	er the name of the	
D. If amending the registered agent and/or registered office address:  new registered agent and/or the new registered office address:		
Nome of New Registered Agent:		
Name of New Negate 12 12		
(Florida street address)		
New Registered Office Address:		
New Registered Office That Case.	, Florida	_
(City)	(Zip Code)	
(Cuy)		

Page 1 of 4

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	<u>PT</u> <u>John</u> V <u>Mike</u> SV <u>Sally</u>	Doe 2 Jones 2 Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			5000
Remove			<del></del>
3 ) Change			41
Add			
Remove			
4) Change	<del></del>		
Add			
Remove			
5) Change	<del></del>		
Add			<del> </del>
Remove	•	•	
6) Change			<del></del>
Add			
Remove			

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

Article V (Membership): change dollar amount of burial fee
from \$200.00 to \$250.00
Article VII (Meetings): change start time of annual meeting
from 2:00pm to 10:00am
Article IX: This private cemetery will not allow any decorations
on graves that are inconsistent with Christian ideals and
principles and/or military branches of the United States
Government. No improper effigies, markers or monuments
bearing offensive inscription such as satanic symbols or
emblems shall be permitted to be placed in or upon any part 🔍 🐇
of the Cemetery. And if any effigy, monument or any structure
whatsoever, or any inscription be placed in or upon a plot, the
Cemetery committee shall have the right, and it shall be their
duty, to enter upon such plot and remove the offensive or
improper object. If the removal of such object incurs any cost,
the burial right owner shall be liable for any and all costs.

Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adward-was/were sufficient for approva	opted by the members and the number of votes east for th.	he amendment(s)
There are no members or membadopted by the board of directors	pers entitled to vote on the amendment(s). The amendment ors.	nt(s) was/were
12/29/2	2108	
Dated Signature	e Kinsey Sections	
(By the chair	man or vice chairman of the board, president or other offi on selected, by an incorporator – if in the hands of a receive	
	appointed fiduciary by that fiduciary)	70), trasce, or
Alice Kinse	∋y	22.78
	(Typed or printed name of person signing)	<del></del>
Secretary/	Treasurer	1
<del></del>	(Title of person signing)	·