M9700000 4504

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COVER LETTER

TO: Amendment Section Division of Corporations

PINELAND MISSI NAME OF CORPORATION:	ONARY BAPTIST (CHURCH, INC.		
DOCUMENT NUMBER:		·		
The enclosed Articles of Amendment and fee are sub	omitted for filing.			
Please return all correspondence concerning this matt	ter to the following:			
ALFRED MARTIN				
	(Name of Contact P	'erson)		
PINELAND MISSIONARY BAPTIST CHURCH, I	NC.			
	(Firm/ Compan	y)		
215 SW SUMMERSET WAY				
	(Address)			
MADISON, FL 32340				
	(City/ State and Zip	Code)		
almartin1960@yahoo.com			v	,
E-mail address: (to be use	d for future annual re	port notification	n)	
For further information concerning this matter, please	e call:			
ALFRED MARTIN	а	850	464-4516	
(Name of Contact Perso		(Area Code)	(Daytime Telephone Numb	ег)
Enclosed is a check for the following amount made p	payable to the Florida	Department of	State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	-	Certif is Certif	D Filing Fee icate of Status ied Copy tional Copy is seed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	A D C1	reet Address mendment Sect ivision of Corpo lifton Building 661 Executive C	nrations	

Tallahassee, FL 32301

FILED

Articles of Amendment to Articles of Incorporation of

PINELAND MISSIONARY BAPTIST CHURCH	I, INC.			
(Name of Corporation	i as current	tiv filed with the Florid	a Dept. of State)	
N97000004504				
(Доси	ment Numbe	er of Corporation (if kno	own)	
Oursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida Not For</i> .	Profit Corporation adopts the	following
A. If amending name, enter the new name of the	e corporati	on:		
	<u> </u>	 		_The new
name must be distinguishable and contain the word 'Company" or "Co." may not he used in the nam		ion" or "incorporated"	or the abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applica				<u> </u>
Principal office address <u>MUST BE A STREET A</u>	DDRESS)			
			•	45.44
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	POV:			<u>ं स्ट</u>
(Muning unaress MAT DE ATOST OFFICE	<u> 1000</u> 7			
		<u> </u>		200°
				;-"
). If amending the registered agent and/or regi	stered offic	e address in Florida, e	nter the name of the	
new registered agent and/or the new register				
Name of New Registered Ayent:	ALFRED MARTIN		<u> </u>	
	215 SUM	MERSET WAY		
		(Flor	ida sıreet address)	
New Registered Office Address:				
	MADISO	N	, Florida 32340	
		(City)	, Florida (Zip Code)	
iew Registered Agent's Signature, if changing le herchy accept the appointment as registered agen	Registered . nt. Lam fan	Agent:		
-		Aesa May	14	
-	Si	gnature of New Register	ed 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	<u>V</u> <u>Mi</u>	nn <u>Doe</u> ke Jones lly Smith	
Type of Action (Check One)		<u>Name</u>	<u>Addres</u> s
1) Change	P	ALFRED MARTIN	215 SW SUMMERSET WAY
X Add			MADISON, FL 32340
Remove			
2) Change	т	SAM MCGHEE	133 SE ARMWOOD TERRACE
X Add			MADISON, FL 32340
Remove			
3) Change	<u> </u>	DOROTHY ALEXANDER	465 DIGGERWASP TRAIL
X Add			MADISON, FL 32340
Remove			
4) Change	DP	COLLIE STEVENS	205 SE OLD COUNTY CAMP RD
Add			MADISON, FL 32340
X Remove			
5) Change	D	DELMONIE THOMAS, SR.	205 SE OLD COUNTY CAMP RD
Add			MADISON, FL 32340
X Remove			
6) Change	D	SABRINA FRANKLIN	205 SE OLD COUNTY CAMP RD
Add			MADISON, FL 32340
X 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.

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Mike Jor Sally Sm	<u>ith</u>	
<u>le</u>	Name	<u>Addres</u> s
D	GLADYS COGDELL	205 SE OLD COUNTY CAMP RD
		MADISON, FL 32340
<u>r</u>	DARLISA CHOICE	205 SE OLD COUNTY CAMP RD
		MADISON, FL 32340
EO	KENYATA SIPLIN	205 SE OLD COUNTY CAMP RD
		MADISON, FL 32340
<u> </u>	DEBRA AIKENS	205 SE OLD COUNTY CAMP RD
		MADISON, FL 32340
		ABOR
	CEO	D GLADYS COGDELL DARLISA CHOICE KENYATA SIPLIN DEBRA AIKENS

f åmending or adding additional Arti ttach additional sheets, if necessary).	(Be specific)					
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<u> </u>						
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•		February 20, 2018	
		dment(s) adoption:	_, if other than the
date t	his document was	signed.	
		February 20, 2018	
Lifec	tive date <u>if applic</u>		
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this date will not te on the Department of State's records.	be listed as the
Adop	tion of Amendm	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficien	was/were adopted-by-the-members and the number of votes east for the amendment(s) t for approval.	
	There are no membadopted by the boa	pers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.	
	Dated	March 12, 2018	
	Signature	Aliced Mant A-	
		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)	
		Alfred Martin	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	