# N 9700000 6198

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#### **COVER LETTER**

TO: Amendment Section Division of Corporations

Greater New Mount Zion Freewill Baptist Church Incorporated NAME OF CORPORATION:
N97000006198 OCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
James Dink, Jr.
(Name of Contact Person)
(Firm/ Company)
807 West Ball Street
(Address)
Plant City, Florida 33563-4909
(City/ State and Zip Code)
nsimmons1455@gmail.com
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
fames Dink, Jr. 813 763-5765
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
inclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee  \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & \Bigcup \\$52.50 Filing Fee \\ Certificate of Status

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### Street Address

Amendment Section Division of Corporations Clitton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to

### Articles of Incorporation

of

Greater New Mu	and Zion freewill Baptist Church In
(Name of Corporation as curr	rently filed with the Florida Dept. of State)
Nat	700006198
(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	tutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:
Greater New Mount Zion Ministry Incorporated	The new
name must be distinguishable and contain the word "corpo "Company" or "Co," may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	Not Applicable
(Principal office address MUST BE A STREET ADDRES	<u>55</u> )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Not Applicable
	2019 TA
D. If amending the registered agent and/or registered o	office address in Florida, enter the name of the
new registered agent and/or the new registered offic	
Name of New Registered Agent: Not Ap	pplicable min a mi
New Registered Office Address:	(Florida street address)
	77
	, Florida (Citv) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	red Agent:  n familiar with and accept the obligations of the position
т пегеоу ассері іне арроінітені из гезізіегей идені. Тит	Gummar war and accept the congunous of the promote
	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 X_Remove X_Add	PT V SV	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	Title	<u>Na</u>	<u>ame</u>	<u>Addres</u> s
l) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		<u> </u>		
Add Remove				
Kemove				
6) Change				
Add				
Remove				

uttach additional sheets, if ne	cessary). (Be spe	ecific)		
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	November 18, 2018	
The date of each amendment date this document was signed		_, if other than th
Effective date <u>if applicable</u> :	November 18, 2018	
	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date will not be be be because the Department of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) oproval.	
There are no members or adopted by the board of c	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated April Signature	18,2019 ames Dnit B.	
have n	chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	<b></b>
Jan	nes Dink, Jr.	
	(Typed or printed name of person signing)	
Dir	rector, Trustee, Chairman	
	(Title of person signing)	