N96000001855

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificate:	s of Status
Special Instructions to	v	a) see u

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D CUSHING

COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

NAME OF CORPORATION: DAK GrovE Baptist Church OF Jacksonville, INC.
DOCUMENT NUMBER: N960000 1855
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tonya Jenkins (Name of Contact Person)
OAK Grove Lighthouse Mission, INC. (Fint/Company)
5301 Cedar Point Rd.
Sacksonville, FL 32226 (City/ State and Zip Code)
Tonya-J-Jenkinse notification)
For further information concerning this matter, please call:
Tonyo Jenkins at 904-751-4638 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certified Copy (Additional Copy is Enclosed) \$35 Filing Fee Certified Copy (Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

October 4, 2016

To:

Amendment Section

ATTN: Diane Cushing

PO BOX 6327

Tallahassee, FL 32314

FROM:

Oak Grove Lighthouse Mission

5201 Cedar Point Road Jacksonville, FL 32226

RE: Oak Grove Baptist Church of Jacksonville, INC., Officer and Name Change Amendment Ref Number: N9600001855

Dear Ms. Cushing,

Thank you for speaking to me this morning concerning the steps that needed to be taken to change the name of our church as well as the officers. I believe I have done so correctly this time.

I have included the original 85.00 money order. If there is any money owed back to the church after the paperwork is processed, please issue a refund in the name of Oak Grove Lighthouse Mission.

Thank you again for your assistance with this matter! You were most helpful and kind. If any further action on our part is required, please let me know. I can be reached at 904-751-4638.

Kindest Regards,

Tonya lenkins

Oak Grove Lighthouse Mission





FLORIDA DEPARTMENT OF STATE Division of Corporations

September 28, 2016

TONYA JENKINS OAK GROVE LIGHTHOUSE MISSION, INC. 5201 CEDAR POINT ROAD JACKSONVILLE, FL 32226

SUBJECT: OAK GROVE BAPTIST CHURCH OF JACKSONVILLE, INC.

Ref. Number: N96000001855

We have received your document for OAK GROVE BAPTIST CHURCH OF JACKSONVILLE, INC. and check(s) totaling \$85.00. However, your check(s) and document are being returned for the following:

You either need to file <u>articles of amendment</u> to change the name of the corporation or file new articles of incorporation with the new name you are wanting to file. You cannot file articles of amendment and new articles it's one or the other. You completed the wrong form for the amendment filing so if you decide to file the name change you will need to complete the proper corporation forms (See Attached).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 016A00020894

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ASSIGNATIONS
ALL SHASSEE FLORIDON

www.sunbiz.org

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Articles of Amendment

Articles	s of Incorporation	and and and
	of	F. 60
_ Oak Grove BADFist C	hereh of Jackson	WAR Flore
(Name of Corporation as curren	tly filed with the Florida Dept. of State)	
N96 000	1d 0 1895	PH N
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation	adopts the following
A. If amending name, enter the new name of the corporat	ion:	
name must be distinguishable and contain the word "corpora" "Company" or "Co." may not be used in the name.	e Mission, Two. tion" or "incorporated" or the abbreviation	The new "Corp." or "Inc."
B. Enter new principal office address, if applicable:	5001 Cedar Pa	SIUT RO.
(Principal office address <u>MUST BE A STREET ADDRESS</u>	Dacksonville, FL	32226
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5001 Cedar Po Jacksonville, Fr	
D. If amending the registered agent and/or registered office and/or the new registered office a		<u>ne</u>
Name of New Registered Agent:	ohn Stanley	
_ 5	201 Cedar Poin	+Rd.
New Registered Office Address:	(Florida street address)	
Ja		ta 33336 (Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		position.
	Jeh A Jani Regnature of New Registered Agent, if changi	ng Ja

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
P	Robert R. Ayers	11340 Soforenko Dr	□ Add
		Jacksonville, FL 32218	■ Remove
		<u></u>	Change
TR	James David Wombles	13382 Yellow Bluff Road	
		Jacksonville, FL 32226	Remove
TR	Ricky Dunn	2150 2nd Street	
		Jacksonville, FL 32218	■ Remove
			Change
P	John Stanley	15974 Shark Road W	Add
		Jacksonville, FL 32226	□ Remove
			☐ Change
T	Windell Wingate	11742 Wynell Road	
		Jacksonville, FL 32218	□ Remove
			☐ Change
<u>T</u>	William M. Jenkins	14041 Crestwick Dr E	<u></u>
		Jacksonville, FL 32218	□ Remove
			☐ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
S	Tonya Jenkins	14041 Crestwick Dr E	■ Add
		Jacksonville, FL 32218	Remove
			Change
			Add
			Remove
			☐ Change
			Add
			□ Remove
			Change
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			☐ Change
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		Remove	
			☐ Change
•			Add
			☐ Remove
			☐ Change

E. If amending or adding additional Art	icles, enter change(s) here:
E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
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<u> </u>	

The date of each amendment(s) adoptedate this document was signed.	lion: October 4,2016	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block of locument's effective date on the Depart	does not meet the applicable statutory filing requirements, the ament of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt was/were sufficient for approval.	ted by the members and the number of votes cast for the ame	endment(s)
There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) w	ras/were
Dated	4/2019	
Signature(By the chayma	n or vice chairman of the poard, provident or other officer-if	directors
have not been s	celected, by an incorporator – if in the hands of a receiver, true ointed fiduciary by that fiduciary)	
	Tohn R. Stawley Jr. (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	16 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Aesident (Title of person signing)	