## 758358

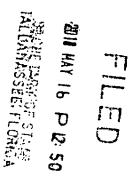
(Re	equestor's Name)	)
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## **COVER LETTER**

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ETHEL BAPTIST (	CHURCH OF G	REENFIELI	D. INC.
DOCUMENT NUMBER: 758358				
The enclosed Articles of Amendment and	d fee are submitted :	for filing.		
Please return all correspondence concern	ing this matter to the	following:		
TRACI A. MALIK, CPA				
	(Name	of Contact Pers	on)	
JONES & COMPANY CPAS PA				
	(F	irm/ Company)		
2513 SEVEN SPRINGS BLVD.				
		(Address)		
TRINITY, FL 34655				
	(City/ S	State and Zip Co	de)	<u> </u>
trustees@nbfcspringhill.com				
E-mail address	: (to be used for futt	ire annual repor	notilication	)
For further information concerning this ma	atter, please call:			
RAY FISHER			13	922-5210
(Name of Cor	ntact Person)		rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amo-	unt made payable to	the Florida Dep	artment of S	State:
■ \$35 Filing Fee	ling Fee & S43.7 c of Status Certif		□\$52.50 Certific Certific	Filing Fee cate of Status ed Copy lonal Copy is
Mailing Address			Address	
Amendment Section Amendment Section  Division of Corporations  Division of Corporations				

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

THE	BETHEL	RAPTIST	CHURCH	OE	CREE	VEIEL D	INC

THE BETHEL BAPTIST CHORCH OF GREENFIELD, IN		
	ntly filed with the Florida Dept. of State)	
758358		
(Document Num	ber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation ad	opts the following
A. If amending name, enter the new name of the corporat	tion:	
NEW BEGINNINGS FAMILY MINISTRIES, INC.		444
name must be distinguishable and contain the word "carpora "Company" or "Co," may not be used in the name.	ation" or "incorporated" or the abbreviation "	The new Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS	()	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
MAT BEAT OF THE BOX		
		<del></del>
2. If amending the registered agent and/or registered office	ce address in Florida, enter the name of the	
new registered agent and/or the new registered office a	iddress:	
Name of New Registered Agent: N/A		
New Registered Office Address:	(Florida street address)	<del></del>
<del></del>	(City) Florida (Zip Co	
ow Registeral Agent's Signature is the state of the	·	/
ew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fait	Agent: miliar with and accept the obligations of the nov	sition
	1	
Si	gnature of New Registered Agent, if changing	<del></del>

Page 1 of 4

WEIGHT OF TANK IN

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:

(Attack 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>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	N/A	
Type of Action (Check One)	Title	Name		<u>Addres</u> s
1) Change			_	
Add				<u> </u>
Remove				
2) Change				
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change			_	
Add			•	
Remove			-	
5) Change				
Add			_	
Remove			-	
6) Change				
Add			_	
			_	
Remove			_	

. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)					
!/A						
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The date of each amendment(s) ad	loption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	· · · · · · · · · · · · · · · · · · ·
Note: If the date inserted in this blo document's effective date on the De	ick does not meet the applicable statutory filing requirements, this date we partment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac was/were sufficient for approva	topted by the members and the number of votes cast for the amendment(s).	5)
There are no members or membadopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were ors.	
Dated		
Signature La	Lisky	
(By the charry have not bee	man or vice chairman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
RAYFIS	HER	
	(Typed or printed name of person signing)	
DEACON	ı	
·	(Title of person signing)	