N000006368

| . (Re | equestor's Name) | |
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| , (Ad | ldress) | |
| (Ac | idress) | |
| (Cit | ty/State/Zip/Phone | > #) |
| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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SEP 2 9 2015 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATIO | TABERNACLE DE L N: | A FOI MINISTERE | HAITIEN, IN | IC. |
|----------------------------------|---|---|--------------------|--|
| | 100000006368 | | | |
| The enclosed Articles of Ame | endment and fee are submi | tted for filing. | | |
| . Please return all corresponder | nce concerning this matter | to the following: | | |
| REV. DR. DENIS FRANCO | IS | | | |
| | (| Name of Contact Pe | rson) | |
| TABERNACLE DE LA FOI | MINISTERE HAITIEN, | INC. | | |
| | | (Firm/ Company |) | |
| 4240 N.W. 36 AVENUE | | | | |
| | | (Address) | - | |
| LAUDERDALE LAKES, FE | L 33309 | | 1 | |
| | (| City/ State and Zip (| Code) | |
| denisfrancois@att.net | | | | |
| E- | mail address: (to be used: | for future annual rep | ort notification |) |
| For further information conce | erning this matter, please c | all: | | |
| REV. DR. DENIS FRANCO | DIS | at | 954 | 297-1665 |
| (| (Name of Contact Person) | | (Area Code) | (Daytime Telephone Number) |
| Enclosed is a check for the fo | ollowing amount made pay | able to the Florida I | Department of | State: |
| □ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | 3\$43.75 Filing Fee Certified Copy (Additional copy is enclosed) | Certif s Certif | 0 Filing Fee icate of Status ied Copy tional Copy is osed) |
| N.C. 212 A | 44 | Q4. | annul A daluman | |

Mailing Address

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

Street Address

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

Articles of Amendment to Articles of Incorporation of

TABERNACLE DE LA FOI MINISTERE HAITIEN, INC.

| (Name of Corporation as c | urrently filed with the Florid | a Dept. of State) |
|---|--------------------------------|--|
| N0000006368 | | 17.19 17.55 19.44 |
| . (Document | Number of Corporation (if kno | wn) |
| Pursuant to the provisions of section 617.1006, Florida 5 amendment(s) to its Articles of Incorporation: | Statutes, this Florida Not For | Profit Corporation adopts the followin |
| A. If amending name, enter the new name of the cor | poration: | TATE |
| name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name. | rporation" or "incorporated" | or the abbreviation "Corp." or "Inc." |
| B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDR</u> | RESS) | |
| C. Enter new mailing address, if applicable: | | |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u> | <i></i> | |
| D. If amending the registered agent and/or registere | d office address in Florida, e | nter the name of the |
| new registered agent and/or the new registered of | ffice address: | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | (Flor | ida street address) |
| | | , Florida |
| - | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I | | ne obligations of the position. |
| | Signature of New Register | red 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 A Add | <u>V</u> <u>Mik</u> | n <u>Doe</u> se <u>Jones</u> y <u>Smith</u> | • | |
|-----------------------------------|---------------------|---|-------------|----------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | ! | <u>Addres</u> s |
| 1) Change | VP | WILLIAMS, CHARLIE | _ | 3541 N.W. 9 COURT |
| Add | | | | FORT LAUDERDALE, FL |
| X Remove | | | | 33311 |
| 2) Change | В МЕМ | WILLIAMS, JANE | | 3541 N.W. 9 COURT |
| Add | | | | FORT LAUDERDALE, FL |
| X Remove | | | | 33311 |
| 3) Change | SEC | FRANCOIS, BILL | | 4240 N.W. 36 AVENUE |
| X Add | | | | LAUDERDALE LAKES, FL |
| Remove | | | , | 33309 |
| 4) X Change | TREAS | NARCELUS, BERNADETTE | | 1139 N.W. 4 AVENUE |
| Add | | | | FORT LAUDERDALE, FL |
| Remove | | | | 33311 |
| 5) Change | VP | FRANCOIS, LINDE | 1 | 4240 N.W. 36 AVENUE |
| X Add | | | | LAUDERDALE LAKES, FL |
| Remove | | | • | 33311 |
| 6) Change | | | • | |
| Add | | | | |
| Remove | | | | |

| attach additional sheets, if necessary). (Be specific) | | |
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| r'. | date of each ameno | SEPTEMBER 21, 2015 | , if other than th |
|------|--------------------------------------|---|---------------------|
| | this document was s | | , ii odici dimi di |
| r ee | ective date <u>if applica</u> | SEPTEMBER 21, 2015 | |
| LIN | ective date <u>ii applica</u> | (no more than 90 days after amendment file date) | |
| | | d in this block does not meet the applicable statutory filing requirements, this date will not on the Department of State's records. | ot be listed as the |
| Ado | option of Amendme | et(s) (<u>CHECK ONE</u>) | |
| | The amendment(s) was/were sufficient | was/were adopted by the members and the number of votes cast for the amendment(s) for approval. | |
| | There are no memb adopted by the boa | ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors. | |
| | Dated | SEPTEMBER 22, 2015 | |
| | Signature | Rev Dr. Denis François | |
| | ` | 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) | |
| | | REV. DR. DENIS FRANCOIS | |
| | | (Typed or printed name of person signing) | |
| | | CEO-PRESIDENT | |
| | | (Title of person signing) | |