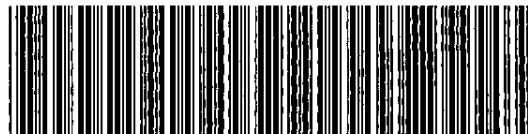


NO1000008348



900161978589

- Curtis Graham  
5343 SNOWFLAKE CT  
- Orlando FL 32839

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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TALLAHASSEE, FLORIDA

N.C.  
C.COULLETTE

JAN 04 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 11, 2009

CURTIS GRAHAM  
5343 SNOWFLAKE CT  
ORLANDO, FL 32839

SUBJECT: BREATH OF LIFE INTERNATIONAL MINISTRIES, INC.  
Ref. Number: N01000008348

We have received your document for BREATH OF LIFE INTERNATIONAL MINISTRIES, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You only sent in the first page of the amendment form. You need to send the complete amendment form and the cover sheet in order to process your reinstatement and amendment. The reinstatement cannot be filed until we can be able to file the amendment to change the name.

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) 245-6903.

Cheryl Coulliette  
Regulatory Specialist II

Letter Number: 809A00037824

RECEIVED  
2009 DEC 31 AM 8:00  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Breath of Life International Ministries Inc.

**DOCUMENT NUMBER:** NO1000008348

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Curtis E. Graham  
(Name of Contact Person)

Breath of Life International Ministries Inc.  
(Firm/ Company)

5343 Snowflake Ct  
(Address)

Orlando, FL 32839  
(City/ State and Zip Code)

For further information concerning this matter, please call:

Curtis E. Graham at (407) 541-7903  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|--|--|---|--|

**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

Breath of Life International Ministries, Inc.  
(Name of corporation as currently filed with the Florida Dept. of State)

NO10000068348

(Document number of corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

**NEW CORPORATE NAME (if changing):**

Breath Of Life International inc.

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

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TALLAHASSEE, FLORIDA

The date of adoption of the amendment(s) was: December 4, 2009

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature

*Curtis E. Graham*

(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.)

\_\_\_\_\_  
(Typed or printed name of person signing)

President / Director

(Title of person signing)

**FILING FEE: \$35**