

NOXXXXXXXXXXXX9648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700144919417

03/09/09--01038--014 **35.00

03/09/09--01038--015 **8.75

FILED
09 MAR -9 AM 9:57
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Handwritten signature/initials and date 3/17/09

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Cry Aloud Deliverance Ministries Inc.

DOCUMENT NUMBER: N02000009648

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

Please return all correspondence concerning this matter to the following:

Shanita James
(Name of Contact Person)

Bride Groom International Ministries
(Firm/ Company)

7758 Invermere Blvd.
(Address)

Jacksonville, Florida 32244
(City/ State and Zip Code)

For further information concerning this matter, please call:

Pastor Shanita James at (904) 379-5560
(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

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
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

Cry Aloud Deliverance Ministries Inc
(Name of Corporation as currently filed with the Florida Dept. of State)

NO2000000 9648
(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:

A. If amending name, enter the new name of the corporation:

BrideGroom International ministries Inc.
The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

1624 Wt 9th St
JACKSONVILLE, FL 32209

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

7758 Invermere Blvd.
JACKSONVILLE, FL 32244

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

_____, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

FILED
09 MAR -9 AM 9:57
TALLAHASSEE FLORIDA
SECRETARY OF STATE

-

• The date of each amendment(s) adoption: 3/1/09

• 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(s) was/were sufficient for approval.

☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 3/1/2009

Signature Shanita James

(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)

Shanita James
(Typed or printed name of person signing)

Pastor
(Title of person signing)