

N03 0000005 393

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

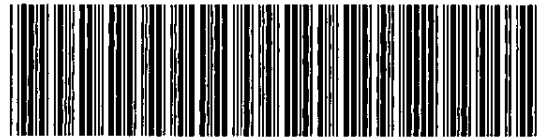
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FILED  
08 FEB 15 PM 12:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Roberts FEB 15 2008



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 6, 2008

HENRY YONCE  
SHILOH MINISTRIES INT  
211 ASTERBROOKE DR  
DELAND, FL 32724

SUBJECT: SHILOH MINISTRIES INTERNATIONAL, INC.  
Ref. Number: N03000005393

We have received your document for SHILOH MINISTRIES INTERNATIONAL, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document number of the name conflict is #N99000001855 - EMBASSY CHURCH INC..

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) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 708A00007863

RECEIVED  
2008 FEB 15 AM 8:00  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Shiloh Ministries International, Inc.

DOCUMENT NUMBER: N 03000005393

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

Please return all correspondence concerning this matter to the following:

Henry Yonce  
(Name of Contact Person)

Shiloh<sup>Ministries</sup> Int  
(Firm/ Company)

211 Astebrooke Dr  
(Address)

Delano, FL 32724  
(City/ State and Zip Code)

For further information concerning this matter, please call:

Henk Yonce at (386) 748-9908  
(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 checked="" 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

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08 FEB 15 PM 12:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(Name of corporation as currently filed with the Florida Dept. of State)

(Document number of corporation (if known))

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

~~The Embassy Church, INC.~~ *hu*

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

(Attach additional pages if necessary)  
(continued)


The date of adoption of the amendment(s) was: 2/1/08

Effective date if applicable: 2/1/08  
(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

  
(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.)

Henry Yonce  
(Typed or printed name of person signing)

President  
(Title of person signing)

**FILING FEE: \$35**