

N04000002599

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

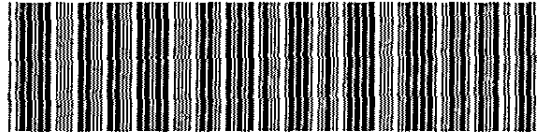
Certified Copies



Certificates of Status

Special Instructions to Filing Officer:

Office Use Only



300037497173

06/14/04--01042--025 \*\*43.75

FILED

04 JUN 14 AM 10:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N/C

T BROWN JUN 17 2004

## TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: Breakthrough Deliverance and Healing Prayer Ministries, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Article Amendment \$35.00

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee &  
Certificate of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Dr. Eddielene Gail Brown  
Name (Printed or typed)

1915 Northwest 171 Terrace  
Address

Miami, FL 33056  
City, State & Zip

305-621-0429  
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

**ARTICLES OF AMENDMENT**  
**to**  
**ARTICLES OF INCORPORATION**  
**of**

**FILED**  
04 JUN 14 AM 10:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Breakthrough Deliverance and Healing Ministries Inc.

(present name)

N04000002599

(Document Number of Corporation (If known))

*Pursuant to the provisions of section 617.1006, Florida Statutes, the undersigned Florida nonprofit corporation adopts the following articles of amendment to its articles of incorporation.*

**FIRST:** Amendment(s) adopted: (INDICATE ARTICLE NUMBER (S) BEING AMENDED, ADDED OR DELETED.)

To amend Article I. The amendments is as follows:

Old name: Breakthrough Deliverance and Healing Ministries Inc

New name: Breakthrough Deliverance and Healing Prayer Ministries, Inc.

**SECOND:** The date of adoption of the amendment(s) was: March 22, 2004

**THIRD:** Adoption of Amendment (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.

Dr. Edzielene Gail Brown

Signature of Chairman, Vice Chairman, President or other officer

Dr. Edzielene Gail Brown

Typed or printed name

Director

Title

March 22, 2004

Date