# ND000003391

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Ad                     | ldress)            |           |
| (Ad                     | ldress)            |           |
| (Cit                    | ty/State/Zip/Phone | e #)      |
| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | isiness Entity Nar | ne)       |
| (Do                     | ocument Number)    |           |
| Certified Copies        | _ Certificates     | of Status |
| Special Instructions to | Filing Officer:    |           |
|                         |                    |           |
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|                         |                    |           |
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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CO   | RPORATION: EL SHADDAI O                      | F GRACE CHURCH, I  | NC  |  |  |
|--|--|--|---|--|--|
| DOCUMENT N   | UMBER: <u>N0600003391</u>                    | 1  |   |  |  |
| The enclosed Art   | icles of Amendment and fee are submi         | itted for filing.  |   |  |  |
| Please return all  | correspondence concerning this matter        | to the following:  |   |  |  |
| _  |  | RSALNVIL, PASTOR   |   |  |  |
|  | (Name of Co                                  | ontact Person)   |   |  |  |
| _  | (Firm/ C                                     | Company)   | <del></del>   |  |  |
| 3385 35th AVENUE NE  |  |  |   |  |  |
| •  | (Ad  | dress)   |   |  |  |
| _  |  | ORIDA 34120  |   |  |  |
|  | (City/ State a                               | and Zip Code)  |   |  |  |
| PLANABIZ@AOL.COM  E-mail address: (to be used for future annual report notification) |  |  |   |  |  |
| For further inform   | nation concerning this matter, please ca     | all:   | ŕ   |  |  |
| REV.SAINVIL  | , DORSALNVIL, PASTOR                         | _at (239) _248-7599  |   |  |  |
| (N   | ame of Contact Person)                       | (Area Code & Daytime   | e Telephone Number)   |  |  |
| Enclosed is a che  | ck for the following amount made pay-        | able to the Florida Department o                                   | 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<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |  |  |
|  | <u> Mailing Address</u>                      | Street Address   | ,   |  |  |
|  | mendment Section Division of Corporations    | Amendment Section Division of Corporations                         | s   |  |  |
|  | O. Box 6327                                  | Clifton Building   | •   |  |  |
|  | allahassee, FL 32314                         | 2661 Executive Center (  | Circle  |  |  |

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

## EL SHADDAI OF GRACE CHURCH, INC

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

#### N06000003391

(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:

| e new name must be distinguishable and e<br>breviation "Corp." or " Inc." <u>"Company"</u> |                          |                     | rporated" or the              |
|--|--------------------------|---------------------|-------------------------------|
| Enter new principal office address, if aprincipal office address MUST BE A STRE            |                          | 621 RIDGE DRIVE     |                               |
|  |                          | NAPLES, FL. 34108   | 3                             |
| . Enter new mailing address, if applicabl (Mailing address MAY BE A POST OFF               |                          | つつひとうにもん ハソニドロコニドニ  |                               |
|  |                          | NAPLES, FL.34120    |                               |
| If amending the registered agent and/or<br>new registered agent and/or the new reg         |                          |                     | er the name of the            |
| Name of New Registered Agent:  | REV.SAINVIL, DORSALNVIL, |                     | _                             |
|  | 3385 3                   | 5th AVENUE NE       |                               |
| New Registered Office Address:   | (Flor                    | ida street address) | -                             |
|  | NAPLES                   |                     | , Florida 34120<br>(Zip Code) |
|  |                          | (City)              | (Zip Code)                    |

Signature of New Registered Agent, if changing

Page 1 of 3

# 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)

<u>Title</u> Name <u>Address</u> **Type of Action PRES** DORSALNVIL, SAINVIL RE 3385 35th AVENUE NE ☑ Add ☐ Remove NAPLES, FL. 34120 VΡ BEUKEMA, SIMON 4456 LAKEWOOD BLVD ☑ Add ☐ Remove NAPLES FL 34112 SEC\_I LOUISY, EMMANUEL 2061 DESOTO BLVD. N. ☑ Add ☐ Remove NAPLES FL 34120 E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

| The date of each amendment(s) adoption: MAY 20TH, 2011   |      |
|--|------|
| (date of adoption is required)  Effective date if applicable: MAY 20TH, 2011   |      |
| (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.   |      |
| Signature  (By the chairman or vice chairman of the board, president or other officer-if direct have not been selected, by an incorporator if in the hands of a receiver, trusted other court appointed fiduciary by that fiduciary) | tors |
| REV.SAINVIL, DORSALNVIL, PASTOR  (Typed or printed name of person signing)   |      |
| PRESIDENT  |      |
| (Title of person signing)  |      |