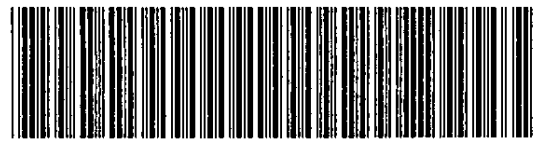


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01/28/11--01010--011 \*\*35.00

02/24/11--01014--003 \*\*17.50

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(Business Entity Name)

(Document Number)

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Office Use Only

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ch8  
10 2/24/11



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 31, 2011

BISHOP ARRIOS OUANELUS  
COVENANT HAITIAN MISSIONARY BAPTIST  
4025 LONGWORTH LOOP  
KISSIMMEE, FL 34744

SUBJECT: COVENANT HAITIAN MISSIONARY BAPTIST CHURCH, INC.  
Ref. Number: N06000004805

We have received your document for COVENANT HAITIAN MISSIONARY BAPTIST CHURCH, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document accordingly.

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) 245-6964.

Irene Albritton  
Regulatory Specialist II

Letter Number: 311A00002505

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11 FEB 23 AM 8:06  
SECRETARY OF STATE

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Covenant Haitian Missionary Baptist Church, inc.

DOCUMENT NUMBER: 11.06000004805

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

Please return all correspondence concerning this matter to the following:

Bishop. ARRIAS Ouanelus  
(Name of Contact Person)

\_\_\_\_\_  
(Firm/ Company)

4025 Longworth Loop  
(Address)

Kissimmee Florida 34744  
(City/ State and Zip Code)

Bishop Ouanelus @ yahoo. com.  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bishop. ARRIAS Ouanelus at ( 407 ) 404-9832  
(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

Covenant Haitian Missionary Baptist Church, inc.  
(Name of Corporation as currently filed with the Florida Dept. of State)

06000004805  
(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:**

Covenant Ministry International, 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)

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**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

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DIVISION OF CORPORATIONS  
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(Attach additional sheets, if necessary)

**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: 02/01/2011  
(date of adoption is required)

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 02/15/2011

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)

ARRIÒS . Ouanekus  
(Typed or printed name of person signing)

Bishop / president  
(Title of person signing)