

N 06000011365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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MAIL

(Business Entity Name)

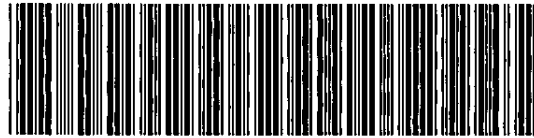
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend
APC

10/9/08

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ELIM CHRISTIAN FAMILY FELLOWSHIP, INC.

DOCUMENT NUMBER: N06000011365

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

Please return all correspondence concerning this matter to the following:

POWELL, EMELINE

(Name of Contact Person)

ELIM CHRISTIAN FAMILY FELLOWSHIP, INC.

(Firm/ Company)

3122 NW 108TH AVENUE

(Address)

SUNRISE, FL. 33351

(City/ State and Zip Code)

For further information concerning this matter, please call:

STEVEN B. FEREN, ESQ.

(Name of Contact Person)

at (954) 238-8000

(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 &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

FILED
08 OCT - 1 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

ELIM CHRISTIAN FAMILY FELLOWSHIP, INC.

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

N06000011365

(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:

NEW CORPORATE NAME (if changing):

N/A

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

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

PRESIDENT/DIRECTOR _____ EMELINE POWELL

V. P./TREASURER/DIR. _____ LENARD POWELL

SECT./DIRECTOR _____ PAULETTE BASCOMBE

NEW MAILING ADDRESS _____ 3211 NW 108TH AVENUE

SUNRISE, FL. 33351

(Attach additional pages if necessary)
(continued)

SECRETARY OF STATE
MID FLORIDA
11/26/08

08 OCT - 1 PM 1:18

FILED

The date of adoption of the amendment(s) was: SEPTEMBER 23, 2008

Effective date if applicable: SEPTEMBER 23, 2008
(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 *Emeline Powell*
(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.)

POWELL, EMELINE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35