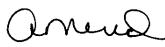
(Req	uestor's Name)	
(Add	ress)	······································
(Add	ress)	
(City	/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Christian Or	uented Evangelistic F	Halkear ministy, e
DOCUMENT NUM	BER: N06000012219		
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mate	ter to the following:	
		REY RIVERA	
	(Name of	Contact Person)	
	(Firm	/ Company)	
		E. VINE ST.	· ·
	(/	Address)	
		MEE, FL 34744 te and Zip Code)	
· · · · · · · · · · · · · · · · · · ·	•	d for future annual report notifica	ation)
For further information	on concerning this matter, please	e can:	
JEFFREY RIVER		at (321) 624-994	
(Name	of Contact Person)	(Area Code & Daytir	ne Telephone Number)
Enclosed is a check for	or the following amount made p	payable to the Florida Department	t of State:
	☐ \$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)
Amen Divisi P.O. I	ng Address dment Section ion of Corporations Box 6327 nassee; FL 32314	Street Address Amendment Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle



February 11, 2010

Jeffrey Rivera 1152 E. Vine St. Kissimmee, FL 34744

SUBJECT: CHRISTIAN ORIENTED EVANGELISTIC HEALTHCARE MINISTRY,

INC.

Ref. Number: N06000012219

We have received your document for CHRISTIAN ORIENTED EVANGELISTIC HEALTHCARE MINISTRY, 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):

Please sign the amendment as the CEOF in the space provided at the bottom of page 3.

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) 245-6907.

Annette Ramsey Regulatory Specialist II

Letter Number: 210A00003510

FEB 19 AM 8: 00

Articles of Amendment

to

FIL	ED
2010 FEB 15	
Smor	. u u 10: 0 :

Articles of Incorpo	ration 2010 FEB 19 AH 10: 07
Articles of Incorpo of Christian Oriented Evangelistic Healt	theare Miraelie TAILor
(Name of Corporation as currently filed with	the Florida Dept. of State SEE. FLORIDA
N06000012219	
(Document Number of Corporati	ion (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation	
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may not	
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)	(7in 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

	ng the Officers and/or Directors, enter		
	and title, name, and address of each (ditional sheets, if necessary)	Differ and/or Director being ad	idea:
Title	<u>Name</u>	Address	Type of Action
(attach d	nding or adding additional Articles, en additional sheets, if necessary). (Be so AMMEND ARTICLE III AS FOL	specific)	NG PURPOSES:
	orporation is organized exclusive		
	purposes, including, for such pu		
that quali	ify as exempt organizations unde	er section 501 (c) (3) of the I	nternal Revenue
Code, or	corresponding section of any fut	ure federal tax code.	
b. Upon	the dissolution of the organization	on, assets shall be distribute	d for one or more
exempt p	ourposes within the meaning of s	ection 501 (c)(3) of the Inter	nal Revenue Code,
or corres	ponding section of any future fed	leral tax code, or shall be dis	stributed to the federal
governm	ent, or to a state or local governr	ment, for a public purpose.	Any such assets not
disposed	of shall be disposed of by the C	ourt of Common Pleas of th	e county in which the
principal	office of the organization is then	located, exclusively for sucl	h purposes or the
such orga	anization is then located, exclusi	vely for such purposes or to	such organization
of organi	zations, as said Court shall dete	rmine, which are organized	and operated
exclusive	ely for such purposes.	T-10-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	
··-	-		

The date of each amendment(s) adoption: 02/05/2010
Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
, t	
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro	e adopted by the members and the number of votes cast for the amendment(s) oval.
There are no members or madopted by the board of dire	nembers entitled to vote on the amendment(s). The amendment(s) was/were ectors.
Dated	02/05/2010
	1117
Signature	Juffry from
	the chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator — if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	JEFFREY RIVERA
	(Typed or printed name of person signing)
	CEOF
	(Title of person signing)