ND800003036

(Re	questor's Name)	
(Ad	dress)	•
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(Cit	ty/State/Zip/Phone	• #)
PICK-UP	WAIT	MAIL
(Bu	ısiness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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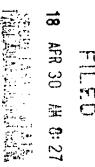




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MAY 0 2 2018 S. YOUNG



COVER LETTER

TO: Amendment Section Division of Corporations

EBEN-EZER INTER NAME OF CORPORATION:	NATIONAL MINIST	RIES, INC.		
N0800003036 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are subn	nitted for filing.			
Please return all correspondence concerning this matte	r to the following:			
E	TIENNE TOUSSAIN	Γ		
	(Name of Contact Per	son)		
	(Firm/ Company)	<u></u>		
P.O. BOX 693781				
	(Address)			
	MIAMI, FL 33269)		
	(City/ State and Zip Co	ode)		
TOUSSA	AINTBIBLESTORE@	GMAIL.COM	М	
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please	call:			
ETIENNE TOUSSAINT		786	355-2121	
(Name of Contact Person)		Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amount made page	yable to the Florida De	epartment of S	State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	D Filing Fee cate of Status ed Copy is sed)	
Mailing Address		et Address		
Amendment Section		endment Section		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

EBEN-EZER INTERNATIONAL MINISTRIES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) N08000003036 (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: EBEN-EZER FULL GOSPEL MINISTRIES & CHARITY, INC. 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. 18800 NW 2ND AVENUE, SUITE 218 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) MIAMI, FL 33169 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: (Florida street address) New Registered Office 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

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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	ETIENNE TOUSSAINT	18800 NW 2ND AVE. STE 2018
X Add			MIAMI, FL 33169
Remove			
2) Change	Р	ELFISE GERMAIN	6641 FICUS DRIVE
Add			MIRAMAR, FL 33023
X Remove			
3) Change		-	
Add			***************************************
Remove			
4) Change			_
Add			
Remove			
5) Change			_
Add			
Remove			
6) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
Kemove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
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	APRIL 25, 2018	
	· / · · · · · · · · · · · · · · · · · ·	, if other than the
date	this document was signed.	
Effe	ective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ument's effective date on the Department of State's records.	e listed as the
Ado	option of Amendment(s) (<u>CHECK ONE</u>)	
	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 APRIL 26, 2018	
	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)	
	ETIENNE TOUSSAINT	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	