# N08000003855

|                         | <u>.</u>                              | ······································ |
|-------------------------|---------------------------------------|--|
| (Re                     | questor's Name)                       |  |
|                         |                                       |  |
| (Ad                     | dress)                                | · · · · · · · · · · · · · · · · · · ·  |
|                         |                                       |  |
| (Ad                     | dress)                                | <u>.</u>                               |
|                         |                                       |  |
| (Cit                    | ty/State/Zip/Phone                    | e #)                                   |
| (                       | <b>,</b>                              | ,                                      |
| PICK-UP                 | WAIT                                  | MAIL                                   |
|                         |                                       |  |
| (Bu                     | siness Entity Nar                     | ne)                                    |
|                         |                                       |  |
| (Dc                     | cument Number)                        |  |
| <b>(</b>                | · · · · · · · · · · · · · · · · · · · |  |
| Contisted Contac        | Contilionto                           | a of Chahua                            |
| Certified Copies        | _ Certificates                        | s or Status                            |
|                         |                                       |  |
| Special Instructions to | Filing Officer:                       |  |
|                         |                                       |  |
|                         |                                       |  |
|                         |                                       |  |
|                         |                                       |  |
|                         |                                       |  |
|                         |                                       |  |
|                         |                                       |  |
| L                       |                                       |  |

Office Use Only



700290357417

09/19/16--01038--009 \*\*43.75

SEP 19 AM II

SEP 2 2 7015

C. CAPROTI RAT

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| ILDREN MINISTRIES INTERNATIONAL, INC.  |
|--|
|  |
|  |
| nitted for filing.   |
| r to the following:  |
|  |
| (Name of Contact Person)   |
| ATIONAL, INC.  |
| (Firm/ Company)  |
|  |
| (Address)  |
|  |
| (City/ State and Zip Code)   |
|  |
| for future annual report notification)   |
| call:  |
| 786-262-269 <b>9</b>   |
| (Area Code) (Daytime Telephone Number)   |
| yable to the Florida Department of State:  |
| Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is Enclosed)  Certified Copy (Additional Copy is Enclosed) |
| Street Address Amendment 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

EL SCHADDALCHILDREN MINISTIES INTERNATIONAL, INC.

| (Name of Corporation as   | currently                | filed with the Florida De   | pt. of State)             |              |                |  |
|---|--------------------------|-----------------------------|---------------------------|--------------|----------------|--|
| (Documen  | nt Number                | of Corporation (if known)   |                           | <del></del>  |                |  |
| Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:    | a Statutes,              | this Florida Not For Profit | t Corporation adopts the  | ne follov    | ving           |  |
| A. If amending name, enter the new name of the co   | orporatior               | <u>ı:</u>                   |                           |              |                |  |
| EL SHADDAI SPRING OF LIFE MINISTRIES, INC   | C. (EL SHA               | ADDAI SOURCE DE VIE         | MINISTRIES, INC.)         | The          | new            |  |
| name must he distinguishable and contain the word "c  | corporatio               | n" or "incorporated" or th  | e abbreviation "Corp.     |              |                |  |
| "Company" or "Co." may not be used in the name.   |                          |                             |                           |              | 22             |  |
| B. Enter new principal office address, if applicable  | e:                       | 6610 NORTH MIAMI AV         | ENUE                      | in the       | 2815           |  |
| (Principal office address MUST BE A STREET ADI  | Darce)                   | ORTH MIAMI, FL 33169        |                           | という。         | 433            |  |
|   |                          |                             |                           |              | 9              |  |
|   | **                       |                             |                           |              | <u> </u>       |  |
| C. Enter new mailing address, if applicable:  | 1                        | N/A                         |                           |              | .1 +           |  |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>  |                          |                             |                           | 0.F          | <del>)</del> ( |  |
|   | _                        |                             |                           |              |                |  |
| D. If amending the registered agent and/or register   |                          |                             | the name of the           |              |                |  |
| new registered agent and/or the new registered  |                          | dress:                      |                           |              |                |  |
| Name of New Registered Agent:   | I/A<br>                  |                             |                           |              |                |  |
| 10  | 16610 NORTH MIAMI AVENUE |                             |                           |              |                |  |
| _   | (Florida street address) |                             |                           |              |                |  |
| New Registered Office Address:  |                          |                             |                           |              |                |  |
| N   | ORTH MI                  | IAMI                        | , Florida                 | <del>)</del> |                |  |
|   |                          | (City)                      | (Zip Code)                |              |                |  |
| New Registered Agent's Signature, if changing Reg<br>I hereby accept the appointment as registered agent. |                          |                             | ligations of the position | n.           |                |  |
| ,t  |                          |                             |                           |              |                |  |
| _   | Sign                     | nature of New Registered A  | gent, if changing         | <u>-</u>     |                |  |

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.

| X Change X Remove X Add       | <u>V Mi</u>  | nn <u>Doe</u><br>ke Jones<br>lly Smith |                  |   |
|-------------------------------|--------------|--|------------------|---|
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u>                            | <u>Addres</u> s  |   |
| 1) X Change                   | P            | PASTOR IRMA SANDERS                    | P. O. BOX 694834 |   |
| Add                           |              |  | MIAMI, FL 33269  | _ |
| Remove                        |              |  |                  |   |
| 2) Change                     | VPT          | PASTOR HOMERE TRESIL                   |                  |   |
| Add                           |              |  |                  | _ |
| X Remove 3) Change            | VPT          | PASTOR JOANIS LOUIS                    | P. O. BOX 694834 |   |
| X Add                         | <del></del>  |  | MIAMI, FL 33269  | _ |
| Remove                        |              |  |                  | _ |
| 4) X Change                   | D            | JESSICA BERNADOTTE                     | P. O. BOX 694834 |   |
| Add                           |              |  | MIAMI, FL 33269  |   |
| Remove                        |              |  |                  |   |
| 5) Change                     | S            | PASTOR JEAN DELFIS                     | P. O. BOX 694834 |   |
| X Add                         |              |  | MIAMI, FL 33269  |   |
| Remove                        |              |  |                  |   |
| 6) Change                     |              | N/A                                    |                  |   |
| Add                           |              |  |                  |   |
| Remove                        |              |  |                  |   |

| E. If amending or adding additional Arti (attach additional sheets, if necessary). | cles, enter change(s) here (Be specific) | ;   |               |      |
|--|--|-----|---------------|------|
| *** PLEASE SEE ATTACHED SHEET ***  |  |     |               |      |
|  | , 100                                    |     |               |      |
|  |  |     |               |      |
|  |  |     |               |      |
|  |  |     |               |      |
|  |  |     |               |      |
| ·  |  |     |               |      |
|  |  |     |               |      |
|  |  |     |               |      |
|  |  |     |               |      |
|  |  |     | <del></del> _ | ···· |
|  |  | *** | -             |      |
|  |  |     |               |      |
|  |  |     |               | ···  |
|  |  |     |               |      |
| 4  |  |     |               |      |
|  |  |     |               |      |
|  |  |     |               |      |
|  |  |     | -             |      |
|  |  |     |               |      |
|  | ·  |     |               |      |
|  |  |     |               |      |
|  |  |     |               |      |

| Γhe  | SEPTEMBER 1, 2016<br>he date of each amendment(s) adoption:  | , if other than the                    |
|------|--|--|
|      | te this document was signed.   | ,                                      |
| Effe | SEPTEMBER 1, 2016 ffective date if applicable:   |  |
|      | (no more than 90 days after amendment file date)   |  |
|      | ote: If the date inserted in this block does not meet the applicable statutory filing requirements becament's effective date on the Department of State's records. | s, this date will not be listed as the |
| ۸de  | doption of Amendment(s) (CHECK ONE)  |  |
|      | The amendment(s) was/were adopted by the members and the number of votes cast for the was/were sufficient for approval.  | amendment(s)                           |
|      | There are no members or members entitled to vote on the amendment(s). The amendment(s) adopted by the board of directors.  | s) was/were                            |
|      | Dated 9/15/2016  |  |
|      | Signature  | r if directors                         |
|      | have not been selected, by an incorporator – if in the hands of a receiver other court appointed fiduciary by that fiduciary)                                      | r, trustee, or                         |
|      | PASTOR IRMA SANDERS T  |  |
|      | (Typed or printed name of person signing)  |  |
|      | PRESIDENT  |  |
|      | (Title of person signing)  |  |

## ARTICLES OF AMENDMENT To ARTICLES OF INCORPORATION Of

# EL SCHADDAI CHILDREN MINISTRIES INTERNATIONAL, INC. Document Number: N08000003855

Pursuant to the provisions of Section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following Amendments to its Articles of Incorporation:

#### **Article Two**

This Corporation is a nonprofit public benefit corporation and is not organized for the private gain of any person. The Corporation is organized under the Nonprofit Public Benefit Corporation Law for, Charitable, Educational, Religious and Scientific purposes to aid the poor and disadvantaged individuals and families towards a life of Self-sufficiency. The programs will consist of, but shall not be limited to: Job Training, Job Placement, Land Acquisition, Housing, Employment, Literacy, Counseling, Temporary Shelter, Teenage Pregnancy, Substance Abuse Awareness and Prevention, Tutoring, HIV/AIDS Awareness and Prevention, Care for Terminally III Children, Assistance to Families and other programs to aid those in need.

## Article Five (A)

This Corporation is organized and operated exclusively for Charitable, Educational, Religious and Scientific purposes within the meaning and guidelines of Section 501 (c) (3) of the Internal Revenue Code.

### **Article Eight**

On the dissolution of the Corporation, its assets remaining after payment of, or provision for payment of all debts and liabilities of this corporation, shall be distributed to a nonprofit fund, foundation or corporation which is organized and operated exclusively for charitable, educational, religious and scientific purposes under Section 501 (c ) (3) of the Internal Revenue Code, or corresponding section of any federal tax code, or shall be distributed to the federal government, or to a state or local government for a public purpose. Any such asset not disposed of shall be disposed of by the Court of Common Pleas of the County in which the principal office of the organization is located, exclusive for such purposes or to such organization or organizations, as said Court shall determine which are organized and operated exclusively for such purposes.