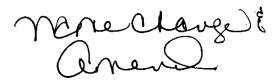
N0900006314

(Requestor's Name)				
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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: HAMIAN C'h ANGING NIFE MINISTRY Du					
DOCUMENT NUMBER: N090000 6314					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Joseph ETIENNE (Name of Contact Person)					
(Firm/ Company)					
1127 BYERLY WAY (Address)					
11.27 by ERLy WAY (Address) On lando Horida 32818 (City/ State and Zip Code)					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Joseph Trienne - at (467) 371-0378 (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 \$\Bigcup \\$43.75 Filing Fee & Certificate of Status \$\B					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301					

	FII	ED				
Articles of Amenda	ation 2009 NOV 20	-En				
to Articles of Incorpor	ation 2009 NOV a	August				
Articles of file of por	20 minu	AH IO				
	TALLETADY	7110:38				
HATIAN CHANGING LIFE	MINISTANOSEE	W.C.				
(Name of Corporation as currently filed with the Florida Dept. of State)						
NO 900000 6314						
(Document Number of Corporation	n (if known)	-				
Pursuant to the provisions of section 617.1006, Florida Statutes, the following amendment(s) to its Articles of Incorporation:	his Florida Not For Profit Corp	poration adopts				
A. If amending name, enter the new name of the corporation	<u>:</u>					
HAITIANS PENTECOSTAL CHURCH S The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may not be	ECOND ALLIANS 'corporation" or "incorporated be used in the name.	ce buc 1" or the				
B. Enter new principal office address, if applicable:						
(Principal office address MUST BE A STREET ADDRESS)						
,		-				
	. 1 /A					
		<u>, </u>				
C. Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BOX)						
	.1/	, ,				
-	/\// ;	/				
D. If amending the registered agent and/or registered office a		me of the				
new registered agent and/or the new registered office add	<u>'ess:</u>					
Name of New Registered Agent:						
	T I n					
	A/A					
New Registered Office Address: (Florid	a street daarelss)					
	, Florid	a				
		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.	тинаг жип апа ассері іне оді	igations of the				
7 · · · · · ·						

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action			
VD_	RIGAUD MIRVILLE	CASSELBERRY, F & 3	Add			
50	MONA MIRVILLA	44/ LOWNDES STUA CASSELGERAY, FR 32	Add Add Remove			
	FRANK WAH	1384 CONARCET CO Onfando, H 2281	Add K Remove			
See ATTACHMENT FOR ADDITIONS E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
<u></u>			· · · · · · · · · · · · · · · · · · ·			

· ATTACHMENT

Please add the following:

Vice President

ROLBERT LABADY ADD 2073 River Tree Circle APT 202 Oxfando, Honida 32439

THEASUREK

ORIGNEAU A. ROLAND ADD 264 SAINT Johns CIRCLE APTIOZ WINTER PARK, HORIDA 32730

Secretary

Ketty LOUIS ADD 860 SEMORANI PARK DRI'VE WINTER PARK, HONISA 32792

The date of each amendment(s) adoption:	10/28/2009
	(date of adoption is required)
Effective date if applicable: (no more it	han 90 days after amendment file date)
Adoption of Amendment(s) (CHEC	CK ONE)
The amendment(s) was/were adopted by the me was/were sufficient for approval.	embers and the number of votes cast for the amendment(s)
There are no members or members entitled to adopted by the board of directors.	vote on the amendment(s). The amendment(s) was/were
Dated 10/28/2 Signature Henne	Joseph /
have not been selected,	chairman of the board, president or other officer-if directors by an incorporator – if in the hands of a receiver, trustee, or duciary by that fiduciary)
Joseph (Typed	or printed name of person signing)
***************************************	Title of person signing)
,	ride of person signing)