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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: HAITIAN BAPTIST COMMUNITY CHURCH, INC.  Name of Corporation		
DOCUMENT NUMBER: N09000010003		
The enclosed Articles of Correction and fee are submitted for filing.		
Please return all correspondence concerning	this matter to the following:	
WILSON BENJAMIN Name of Contact Person		
Firm/Company		
2155 AMERICANA BLVD		
Address		
ORLANDO, FL 32839 City/State and Zip Code		
BENJAMINTAX@AOL.COM  E-mail address: (to be used for future annual report notification)		
For further information concerning this mat	ter, please call:	
WILSON BENJAMIN  Name of Contact Person	_ at (407) 687-7515 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount	nt:	
\$35.00 Filing Fee	✓ \$43.75 Filing Fee & Certificate of Status	
\$43.75 Filing Fee & Certified Copy	\$52.50 Filing Fee, Certificate of Status & Certified Copy	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	
TATIONAL TO THE TAIL TO THE TENTE TO THE TEN	Tallahassee, FL 32301	

## ARTICLES OF CORRECTION

for

## HAITIAN BAPTIST CUMMUNITY CHURCH, INC. Name of Corporation as currently filed with the Florida Dept. of State N09000010003 Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected. These articles of correction correct NAME OF CORPORATION (Document Type Being Corrected) filed with the Department of State on OCTOBER 14, 2009 (File Date of Document) Specify the inaccuracy, incorrect statement, or defect: TYPING MISTAKE IN THE NAME OF THE CORPORATION HAITIAN BAPTIST CUMMUNITY CHURCH, INC. Correct the inaccuracy, incorrect statement, or defect: CORRECT NAME " HAITIAN BAPTIST COMMUNITY CHURCH, INC." Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Filing Fee: \$35.00

PRESIDENT

(Title of person signing)

ARSENE NOEL

(Typed or printed name of person signing)