N09905

(R	Requestor's Name)
(A	address)
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(C	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
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(B	Business Entity Name)
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Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:
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SECHE LARY OF STATE



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 2, 2009

SARAH M. BUTTERMORE ALETHEIA BIBLE CHURCH, INC. P O BOX 924425 PRINCETON, FL 33092

SUBJECT: ALETHEIA BIBLE CHURCH, INC.

Ref. Number: N09905

Upon receipt of your letter and/or check(s) totaling \$43.75, no document was found. Please send your document with any fees due to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 709A00029394

COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee, FL 32314

NAME OF CORPORATION: Aletheir	a Bible	Churchino
DOCUMENT NUMBER: NO9905		
The enclosed Articles of Amendment and fee are submitted	d for filing.	
Please return all correspondence concerning this matter to	the following:	
Sarah Butt (Name of Cont	act Person)	
Aletheia Bilde	Church,	Inc.
70 Box 924L	125 ess)	
Princeton FL (City) State and	33072 d Zip Code)	
E-mail address: (to be used for	ast net	ution)
For further information concerning this matter, please call		
Sarah Buttermore. (Name of Contact Person)	at (<u>305</u>) <u>43</u> \ (Area Code & Daytin	ne Telephone Number)
Enclosed is a check for the following amount made payab	le to the Florida Department	of State:
S35 Filing Fee S43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporation Clifton Building	ons

Tallahassee, FL 32301

2661 Executive Center Circle

September 19, 2009

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

To Whom it May Concern,

We are writing this letter to inform you of our official name change. We are changing our name from, Aletheia Bible Church, Inc. to Truth Bible Fellowship, Inc. We have done a preliminary search through sunbiz.org and have found Truth Bible Fellowship to be an available name.

Our meeting address, as well as, our mailing address will remain the same. We have included a check, written out to Florida Department of State, for the amount of \$43.75. This is to cover the filing fee (\$35.00) and the cost of the certified copy (\$8.75).

Thank you for your time in reviewing this letter. If you have any questions feel free to contact us.

Sincerely.

Sarah M. Buttermore Registered Agent 305-431-3572 P.O.Box 924425

Princeton, FL 33092

Document #: N09905

Articles of Amendment to Articles of Incorporation of



Aletheia Bible Church Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
109905
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
AIf amending name, enter the new name of the corporation:
The new 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.
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) (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) <u>Title</u> <u>Address</u> **Type of Action** <u>Name</u> _____ ☐ Add _____ ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: \(\frac{\chi_0 - \chi/- \chi_9}{\chi} \)
Effective date if applicable: (date of adoption is required)
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
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 9-10-09 Signature
(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
Pastor Director (Title of person signing)