## N10000009489

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

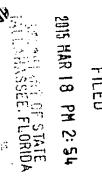




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Marie Charge & amena



X00789, 02544, 02976, 00671

## **COVER LETTER**

TO: Amendment Section Division of Corporations	· · · · · · · · · · · · · · · · · · ·	
NAME OF CORPORATION: WORDS	OF FAITH EMPOWERHENIT	- church, the
DOCUMENT NUMBER: 100000	9489	
The enclosed Articles of Amendment and fee are subm	aitted for filing.	
Please return all correspondence concerning this matter	to the following:	
Carline Fils-Aime		
	Name of Contact Person)	
	N/A	
	(Firm/ Company)	
640 wabasso Ave	5,	, · . ·
	(Address)	
LEhigh Acres, FL	33974 City/ State and Zip Code)	,
ministercarline & E-mail address: (to be used)	for fature annual report notification)	A e
For further information concerning this matter, please c	•	
Carline Fils Ame (Name of Contact Person)	at ( 239) 810 5250 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount made pay	able to the Florida Department of State:	
\$35 Filing Fee \$\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee Certificate of Status (Additional Copy is Enclosed)	ال شخوات مهورا
Mailing Address Amendment Section	Street Address Amendment Section	
Division of Corporations	Division of Corporations	

Clifton Building

- 2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

. . . .



March 16, 2015

Carline Fils-Aime 640 Wabasso Ave S. LeHigh Acres, FL 33974

SUBJECT: WORDS OF FAITH EMPOWERMENT CHURCH INC.

Ref. Number: N10000009489

We have received your document for WORDS OF FAITH EMPOWERMENT CHURCH INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is 756915.

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) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 115A00005279

## Articles of Amendment

Articles of Incorporation

FILED of (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: Evanaelical 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: (Florida street address) New Registered Office Address: 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

Page 1 of 4

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	PT John Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	X/A	
Add		
2) Change	AA	·
Add Remove	·	
3) Change	AJA	
Add		
4) Change	-4/12	
Add Remove		
5) Change	X/A	
Add Remove	'/	
6) Change	NIA	
Add		
Remove		

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
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 3/9/15	
Signature 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)	
PAUL HENRY FILS - AIME (Typed or printed name of person signing)	
Director	
(Title of person signing)	