M110000008816

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COVER LETTER

Division of Corporations L'eglise de dieu Eben-Ezer, inc. DOCUMENT NUMBER: 11000008816 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Firm/ Company) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

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

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

•	of
L'eglise de dieu Ebe	en-Ezer, Inc.
(Name of Corporation as currently filed with the Florid	
N11000008816	
(Document Number of Corporati	on (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, amendment(s) to its Articles of Incorporation:	this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>n:</u>
L'eglise de clieu Eben-	- Ezer en Christ, Inc. The new
name must be distinguishable and contain the word "corporatio" (Company" or "Co." may not be used in the name.	n" or "incorporated" or the abbreviation "Corp." or " Inc."
B. Enter new principal office address, if applicable:	**************************************
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	A Second
-	Ah
-	250
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	H _C 7 F
(mailing undress MAT BE A TOST OF FICE 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 add	<u>iress:</u>
Name of New Registered Agent:	
-	
New Registered Office Address:	ilorida street address)
	Elouido
(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered A	gent*
I hereby accept the appointment as registered agent. I am fami	
Signature of New Register	red 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	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	V Mil	ce Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add Remove	ρ	Geles Gain	2048 MARAVILLA CIRCLE FORT HYRIS FI 33901
2) Change Add Remove	5	Melanie Celin	2441 Moreno Ave. Fort Myes Fl 33901
3) X Change Add Remove	<u> </u>	Jean Rodely Robert	2441 Morego Me FORT Myers FT 339101
4) Change Add Remove	CC	Mackenson Govin	2048 HARAVILLA CIVCLE
5) Change Add Remove	CA	Yeroniaue c. osiris	40Sle Winkler Ave Ex 7 Fort reyers FI 339116
6) Change Add Remove	_Н_	Ulrick Jean	5234 Ashword Cir F04 Hyers F1 33901
			

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: _\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
Effective date <u>if applicable</u> :			
	(no more than 90 days	after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the val.	ne number of votes cast for the	ne amendment(s)
There are no members or men adopted by the board of direct	mbers entitled to vote on the anottors.	nendment(s). The amendmen	nt(s) was/were
Dated	12/12		•
Signature	MV		
have not b	airman or vice chairman of the losen selected, by an incorporated appointed fiduciary by that fid	or - if in the hands of a recei-	
	Melania Cel	- 10	
	(Typed or printed name of po	erson signing)	
	Secretary		
	(Title of person signing)		