

N12000004977

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

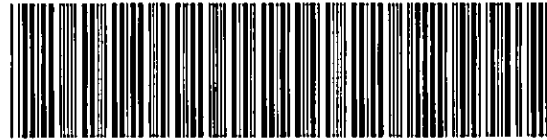
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AUG 21 2021

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

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2021 JUN -1 PM 4:19
TALLAHASSEE

May 4, 2021

PASTOR EDDY DERAVID
EGLISE UNIVERSELLE DE LA NOUVELLE JERSAL
420 NW 126 ST
NORTH MIAMI, FL 33168

SUBJECT: EGLISE UNIVERSELLE DE LA NOUVELLE JERUSALEM, INC
Ref. Number: N12000004977

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

PLEASE COMPLETE THE NOT FOR PROFIT AMENDMENT FORM ONLY AND RESUBMIT THIS FORM ONLY. THE DOCUMENT IS ATTACHED. YOU HAVE SUBMITTED DOCUMENTATION FOR A 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) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 120A00023286

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: EGLISE UNIVERSELLE DE LA NOUVELLE JERUSALEM, Inc

DOCUMENT NUMBER: N12000004977

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PASTOR EDDY DERAVIL
(Name of Contact Person)

EGLISE UNIVERSELLE DE LA NOUVELLE JERUSALEM, Inc
(Firm/ Company)

420 N.W. 126 ST.
(Address)

N. MIAMI FL 33168
(City/ State and Zip Code)

THEFRUITSOFTHEHOLYSPIRIT@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PASTOR ELDA DERAVIL at 786-385-9795
(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:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) |
|--|---|--|--|

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

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

EGLISE UNIVERSELLE DE LA NOUVELLE JERUSALEM, INC
(Name of Corporation as currently filed with the Florida Dept. of State)

N12000004977
(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:

CHURCH OF JESUS CHRIST NEW JERUSALEM, INC *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)

N/A

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

N/A

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TALLAHASSEE, FLORIDA

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: ELDA DERAVIL

420 N.W. 126 Street
(Florida street address)

New Registered Office Address:
Miami, Florida 33168
(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)

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:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
--------------------------------------	--------------	-------------	----------------

- | | | | |
|--|-----------|---------------------|-----------------------------------|
| 1) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add

<input type="checkbox"/> Remove | OFFICER | YVETO BAUGE | 470 N.W. 126 ST
MIAMI FL 33168 |
| 2) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add

<input type="checkbox"/> Remove | PRESIDENT | PASTOR EDDY DERAVIL | 470 N.W. 126 ST
MIAMI FL 33168 |
| 3) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | DIRECTOR | PASTOR ELDA DERAVIL | 470 N.W. 126 ST
MIAMI FL 33168 |
| 4) <input type="checkbox"/> Change
<input type="checkbox"/> Add

<input type="checkbox"/> Remove | _____ | _____ | _____ |
| 5) <input type="checkbox"/> Change
<input type="checkbox"/> Add

<input type="checkbox"/> Remove | _____ | _____ | _____ |
| 6) <input type="checkbox"/> Change
<input type="checkbox"/> Add

<input type="checkbox"/> Remove | _____ | _____ | _____ |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Lined area for text entry.

The date of each amendment(s) adoption: 9-7-2020, if other than the date this document was signed.

Effective date if applicable: 7-7-2021
(no more than 90 days after amendment file date)


Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 7-7-2021

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)

ELDA DEANIK
(Typed or printed name of person signing)

pastor secretary/treasurer
(Title of person signing)