N 16000008719

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C. GOLDEN

JUL -3 2017

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION:	L'EGLISE DE DIEU		LE HARMON	IE, INC
	6000008719			
The enclosed Articles of Amend	•			
Please return all correspondence	concerning this matter	to the following:		
ECLESIASTE JEAN				
	(Name of Contact P	erson)	
		(Firm/ Company	y)	
7219 DOMINION AVE				
		(Address)		
ORLANDO, FL 32807				
	(City/ State and Zip	Code)	
ACCOUNTING@GREATVAL	UEBUSINESSES.CO	М		
E-ma	il address: (to be used	for future annual re	ort notification)
For further information concerni	ng this matter, please c	ali:		
JOAM ST JEAN, MAFM		at	407	556-5431
(Na	me of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the follo	wing amount made pay	able to the Florida I	Department of S	state:
■ \$35 Filing Fee	\$43.75 Filing Fee & C Certificate of Status		Certifi s Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Addu Amendment S Division of Co P.O. Box 6327 Tallahassee, F	ection rporations	. An Di Cli	reet Address nendment Section vision of Corpo ifton Building 61 Executive Co	rations

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

FILED

L'EGLISE DE DIEU JERUSALEM BELLE HARMONIE, INC	2011 JUN 23 PM 2: 2
(Name of Corporation as currently filed with the	e Florida Dept. of State) SECRE LEAY OF STAT
N16000008719	TÄLLAHASSEE. FLORII
(Document Number of Corporation	n (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida I</i> amendment(s) to its Articles of Incorporation:	Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" or "incorp "Company" or "Co." may not be used in the name.	ocrated" or the abbreviation "Corp." or "Inc."
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 Flonew registered agent and/or the new registered office address:	orida, enter the name of the
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	
	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar with and a	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:

(Atrach 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change	•		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
ARTICLE III:THE CORPORATION IS ORGANIZED EXCLUSIVELY FOR RELIGIOUS PURPOSES, WORSHIP.
NO PART OF THE NET EARNINGS OF THE CORPORATION SHALL INURE TO THE BENEFITS OF, OR BE
DISTRIBUTABLE TO ITS MEMBERS, OFFICERS, OR OTHER PRIVATE PERSONS, EXCEPT THAT THE
CORPORATION SHALL BE AUTHORIZED AND EMPOWERED TO PAY REASONABLE COMPENSATION FOR
SERVICES RENDED.
UPON THE DISSOLUTION OF THE CORPORATION, ASSETS SHALL BE DISTRIBUTED FOR ONE OR MORE
EXEMPT PURPOSES WITHIN THE MEANING OG SECTION 501(C)(3) ON THE INTERNAL REVENUE CODE.
·

	• 03/01/2017	
The date of each ameno	lment(s) adoption:	_, if other than the
date this document was s	igned.	
	03/01/2017	
Effective date <u>if applica</u>		
	(no more than 90 days after amendment file date)	
	d in this block does not meet the applicable statutory filing requirements, this date will not e on the Department of State's records.	be listed as the
Adoption of Amendmer	at(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were sufficient	was/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
There are no member adopted by the boar	ers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.	
Dated _	05/15/2017	
Signature _		
(E	By the charman 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)	_
	ECLESIASTE JEAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	