MMDDD643

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	es of Status
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DEC 13 M 9: 26

DEC 14 2017 S. YOUNG



December 1, 2017

BJ FLETCHER ALOI & FLETCHER BAILBONDS 524 APPLEYARD DRIVE TALLAHASSEE, FL 32310

SUBJECT: BJ FLETCHER MINISTRIES INC

Ref. Number: N17000006613

We have received your document for BJ FLETCHER MINISTRIES 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 617A00024276



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N:	ISTRIES INC,			
N DOCUMENT NUMBER: _	117000006613				
The enclosed Articles of Ame	endment and fee are subm	itted for filing.			
Please return all corresponder	nce concerning this matter	to the following:			
BJ FLETCHER					
	(Name of Contact Po	erson)		
ALOI & FLETCHER BAILE	BONDS				
		(Firm/ Company	/)		
524 APPLEYARD DRIVE					
		(Address)		· · ·	
TALLAHASSEE FL					
	(City/ State and Zip	Code)	······································	
DRBJFLETCHER@GMAIL	.СОМ				
E-	mail address: (to be used)	for future annual rep	ort notificati	on)	
For further information conce	rning this matter, please c	all:			
BJ FLETCHER		at	850	264-9718	
(Name of Contact Person)		(Area Code	(Daytime Telephone Number	er)
Enclosed is a check for the fo	llowing amount made pay	able to the Florida I	Department o	f State:	
☐ S35 Filing Fee	■\$43.75 Filing Fee & C Certificate of Status	343.75 Filing Fee Certified Copy (Additional copy i enclosed)	Cert s Cert (Add	50 Filing Fee ificate of Status ified Copy ditional Copy is closed)	
Mailing Ac			reet Address		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

BJ FLETCHER MINISTRIES INC.

(Name of Corporation	as currently	filed with the F	lorida Dept. of State)	
N17000006613				
(Docum	ment Number o	of Corporation (i	f known)	
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	rida Statutes, t	this <i>Florida Not</i>	For Profit Corporation ac	lopts the following
A. If amending name, enter the new name of the	e corporation	<u>:</u>		
N/A				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ı" or "incorpora	ted" or the abbreviation '	
	N	/A		
B. <u>Enter new principal office address, if applica</u> Principal office address <u>MUST BE A STREET A</u>				
	_			
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE)	<i>BOX</i>) N	/A	·	
	_		•	Color O
	_			10 10 To
D. If amending the registered agent and/or regis			la, enter the name of the	· Sin in
new registered agent and/or the new register		ress:		- E - Co
Name of New Registered Agent:	N/A		·	
				-
N. B. L. JOG. Allinois		(Florida street address)		
New Registered Office Address:				N 1/4
	N/A		, Florida	
		(City)	(Zip C	Code)
New Registered Agent's Signature, if changing I				
hereby accept the appointment as registered agen	nt. I am famil	iar with and acce	ept the obligations of the p	osition.
_	O!	atura of Van. n.	gistered Agent, if changing	
	sign	atare oj ivew Keg	змегеа лдепі, ў спапдіпу	,

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	<u>V</u> <u>Mil</u>	n Doe te Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	BJ FLETCHER	2347 CYPRESS COVE DR
Add			TALLAHASSEE, FL 32310
X Remove			
2) Change	<u>D</u>	JEAN PARSON	2442 WARFIELD AVE
Add			JACKSONVILLE, FL 32218
X Remove			
3) Change	D	SHIELA MORRIS	905 W. DOVER ST.
Add			TALLAHASSEE, FL 32304
X Remove			
4) Change	С	WILLIAM FLETCHER JR	4528 BOWFIN DR.
X Add			TALLAHASSEE, FL 32303
Remove			
5) Change			
Add			
Remove			
6) Change			_
Add			
Remove			

(attach additional sheets, if necessary). (Be specific)
ARTICLE III
THE SPECIFIC PURPOSE FOR WHICH THIS CORPORATION IS ORGANIZED IS:
TO EXAMINE SPIRITUAL INFLUENCES ON INDIVIDUALS. COMMUNITIES, ORGANIZATIONS, SYSTEMS, &
SOCIETIES; IN ORDER TO HELP LEADERS CREATE MESSAGES AND PROGRAMS, COMPELLING ENOUGH
TO INFLUENCE CHANGE.
·

****		11/27/2017	
	e date of each amend e this document was a		_, if other than the
	ective date if applic	01/01/2018	
EII	ecove date <u>it appite</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 be on the Department of State's records.	e listed as the
Ado	option of Amendme	nt(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 memb adopted by the boa	ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.	
	Dated	11/27/2017	
	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)	
		WILLIAM FLETCHER JR	
		(Typed or printed name of person signing)	
	٠	CHAIRMAN	
		(Title of person signing)	