N2300014164

(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:
Incorrect Form

Office Use Only



700432961967

JT 112 09--01/155--104 ++45.75



12

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Bridge Unite Ministries, Inc.
DOCUMENT NUMBER: N23000014164
DOCUMENT NUMBER: 110000011144
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Bernice A. Hagan
(Name of Contact Person)
(Firm/ Company)
P.O. BOX 9586
(Address)
Port St. Lucie, FL. 34953 (City/ State and Zip Code)
(City/ State and Zip Code)
bridgeunitemini Stries Egmail Com E-mail address: (to be used for future annual apport notification)
For further information concerning this matter, please call:
Bernice Hagan (Name of Contact Person) at (17a) 318.9052 (Area Code) (Daytime Telephone Number)
(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:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee
Mailing Address Street Address

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

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

FILED

A	of	j- [_	ED
Bridge Unite Ministre (Name of Corporation as currently filed with the Florida)	S, Inc.	2024 AUG 27	AMII - 50
	pept. of state)	ZUZY RUG Z I	HI111- 20
N23000014164	per of Corporation (if known)	SECRETALY	OF STATE
(Document Numb	er of Corporation (II known)	TALLAHA:	SSEE, FL
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profi</i>	t Corporation as	dopts the following
A. If amending name, enter the new name of the corporat	tion:		
A\u03b4			The new
name must be distinguishable and contain the word "corpora" "Company" or "Co," may not be used in the name.	tion" or "incorporated" or th	e abbreviation '	Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	N/A	.,,	 _
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	P.O. Box 958		
	Port St. Lu 34953	cve, t L	·
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office:		the name of the	
Name of New Registered Agent: N			
New Registered Office Address:	tFlorida str	vet address)	
New Registered Office Address.			
	(City)	Florida, Zip C)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent:	, ,	
<u> </u>	ignature of New Registered Aş	ent, 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: X Change X Remove X Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add		<u></u>	
Remove			
E. If amending or add (attach additional sho		rticles, enter change(s) here: . (Be specific)	
We are add	ung to t	Article III "the specia	ic purpose for
Mhich thi	s corpor	ation is organized", - s organized exclusive ious-educational pu licensina and orda	to include,
"The Corpor	ration 19	<u>5 organized exclusion</u>	ely for charitable,
religious c	<u>und relig</u>	ious-educational pu	irposes, including
but not lin	mited to	licensing and orda	uning ministers

and for in-kind purposes, the making of distributions
to progenizations that qualify as Exempt progenizations under Section 501(c)(3) of the Internal Revenue Code which governs non-profit
pragnizations under Section 501(c)(3) of the
Internal Revenue Code which opverns non-profit
Corporations!"
The date of each amendment(s) adoption: Tuly 27, 2024 if other than the date this document was signed.
Effective date if applicable: (no more than 90 days after amendment file date)
(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 August 19, 2024
	Signature Signature
	(By the chairman or vice thairman 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)
	Bernice A. Hagan (Typed or printed name of person signing)
	President
	(Title of person signing)



July 29, 2024

BERNICE A. HAGAN P.O. BOX 9586 PORT ST. LUCIE, FL 34953

SUBJECT: BRIDGE UNITE MINISTRIES, INC.

Ref. Number: N23000014164

We have received your document for BRIDGE UNITE 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 form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA NOT FOR PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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.

Anissa Butler Regulatory Specialist II

Letter Number: 924A00016679

AUG 27 2321