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07/02/24

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

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NAME OF CORPORATION: EGUSE TO	Sernocle de Delivrance Inc
DOCUMENT NUMBER: N 34000	0000 972
The enclosed Articles of Amendment and fee are submitted	ed for filing.
Please return all correspondence concerning this matter to	the following:
Paulaine Liberal	
(Na	ime of Contact Person)
	i.
	(Firm/ Company)
3533 N.W 38 Ave	nul
	(Address)
Lauderdale lakes	P133309
(Éir	ty/ State and Zip Code)
faulaine 120 40 h	future annual report notification)
For further information concerning this matter, please call	Ŀ
	at PSY-BDD-624Y (Area Code) (Daytime Telephone Number)
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payab	le to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐\$-	
	Certified Copy Certificate of Status
	Additional copy is Certified Copy (Additional Copy is
	Enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

Artic	les of Amendment	
	to	
Articl	es of Incorporation	
EGlise Tabernach	6 de I	elivrance In
Name of Corporation as currently filed with the Florida	Dept. of State)	
1124000000972	2	
(Document Num	ber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	des, this <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ıtion:	
		The new
name must he distinguishable and contain the word "corpor	ation" or "incorporated	I" 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	<u> </u>	. 14
		<u> </u>
		2. 2.
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		□ 12
D. If amending the registered agent and/or registered of	fice address in Florida.	enter the name of the
new registered agent and/or the new registered office	address:	
Al CAL D. San J. Comm.		
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
	(F	lorida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
	4.4	
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f	d Agent: Samiliar with and account	the obligations of the position
тиетелу ассерстве арранишем аз геузметей идет. Тит ј	umana mana ana accept	or conganone of the position.
	Signature of New Regist	ered 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: X.Change X. Remove X. Add	PT John I Y Mike . SV Sally \$	<u>Jones</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add	<u>P</u>	Princius J. Ohnson	4425 Thee House Fort Landerdale, FL 37 319
Remove 2) Change Add	VP_	Liberal D, ieuvillard	3533 NW 38th Ave Landerdaled eles, Ft 33309
Remove 3) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
E. If amending or additional sheet		ticles, enter change(s) here: (Be specific)	
			

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	<u></u>
	
	
	
	, if other than the
date this document was signed.	
Effective date if applicable: the more than 90 days after amendment file date)	
	201 - 1 12 1 1 d

<u>Note:</u> 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 adop	e are no members or members entitled to vote on the amendment(s). The amendment(s) was/were sted by the board of directors.
	Signature (By a director, president or other officer – if directors or officers have not been
	selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Paulaine Liberal (Typed or printed name of person signing)
	President (Title of person signing)