N24000010603

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

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NAME OF CORPORATION: Haiti Bi	ble Mission Inc.	
DOCUMENT NUMBER: N2400001060	03	
The enclosed Articles of Amendment and fee		
Please return all correspondence concerning th	is matter to the following:	
Luis Zamot		
	(Name of Contact Person)	
Haiti Bible Mission Inc.		
	(Firm/ Company)	
7120 Ponderosa Pine Dr.		
	(Address)	
Ft. Myers, FL 33966		
	(City/ State and Zip Code)	
Luis@HaitiBibleMission.org		
E-mail address: (to	be used for future annual report notificat	ion)
For further information concerning this matter	please call:	
Luis Zamot	407-9	69-2600
(Name of Contact	Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount a	nade payable to the Florida Department	of State:
\$35 Filing Fee □\$43.75 Filing Fee Certificate of \$	Status Certified Copy Cer (Additional copy is Cer enclosed) (Ad	.50 Filing Fee tificate of Status tified Copy ditional Copy is closed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Se Division of Co The Centre of	ection rporations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2024 OCT 23 PM 4: 35 Haiti Bible Mission Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N24000010603 (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: 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) 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 Florida, enter the name of the new registered agent and/or the new registered office address: 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: 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: X Change X Remove X Add	PT John Do V Mike Jo SV Sally St	one <u>s</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change Add	PD	Mark W. Stockeland	366 Nutmeg St Lehigh Acres, FL 33972
Remove 2) X Change Add	D	Lacey C. Stockeland	366 Nutmeg St Lehigh Acres, FL 33972
Remove 3) Remove Add Remove		_ 	
4) Change Add			
Remove 5) Change Add Remove			
6) Change Add Remove			
		icles, enter change(s) here: (Be specific)	
			

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The date of each amendment(s) as	doption:	if other than the
date this document was signed.		
Effective date if applicable:	10/17/2024	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will no epartment of State's records.	t be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast for the amendment(s) al.	

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Dated	10/17/2024
Signatur	Lis & Genet
	(By the chairman or vice mairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Luis Zamot
	(Typed or printed name of person signing)
	Treasurer, Secretary, Director
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were