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COVER LETTER

TO: Amendment Section Division of Corporations

EGLISE BAPTISTE PRIMITIVE INC AME OF CORPORATION:
N24000011023
OCUMENT NUMBER:
he enclosed Articles of Amendment and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
LEMING LAGUERRE
(Name of Contact Person)
GLISE BAPTISTE PRIMITIVE INC
(Firm/ Company)
25 S STATE ROAD 7STE 104-198
(Address)
VELLINGTON, FL 33414
(City/ State and Zip Code)
AGUERREFLEMING@GMAIL.COM
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please eall:
LEMING LAGUERRE 561 797-6248
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
inclosed is a check for the following amount made payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee & ☐ Certificate of Status ☐ Certified Copy ☐ Cer

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address

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

EGLISE BAPTISTE PRIMITIVE INC				
(Name of Corporation as currently filed with th	e Florida De	ept. of State)		
N24000011023				
(Docur	nent Number	r of Corporation (if know	vn)	
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes	, this <i>Florida Not For F</i>	rofit Corporation adopts	the following
A. If amending name, enter the new name of th	e corporatio	<u>on:</u>		
EGLISE BAPTISTE PIMITIVE, TABERNACLE	DE L'EVA	NGILE, INC.		The ne
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		on" or "incorporated" (or the abbreviation "Corp	
B. Enter new principal office address, if applica	ahle:	N/A		
(Principal office address <u>MUST BE A STREET</u>)				
		,== .		
	-	······		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u> BOX</u>)	N/A		
	-			
				
D. If amending the registered agent and/or regi	istered office	address in Florida, en	ter the name of the	
new registered agent and/or the new register	red office ad	dress:		
Name of New Registered Agent:	N/A			
		(Florid	la street address)	
<u>New Registered Office Address</u>				
	N/A		Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing	Registered /	Agent:		
I hereby accept the appointment as registered ager	nt. – Lam fam	iliar with and accept the	obligations of the position	n.
				· <u>.c.</u> ;
-			1.4	<u> </u>
	Sio	nature of New Registers	a Agent il changing	ت :

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	V Mik	n Doe te Jones y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add		N/A	
Remove			
2) Change Add		· · · · · ·	
Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			Z0ZH OCT SECNET TALLA
E. If amending or additional sheet		Articles, enter change(s) here: v). (Be specific)	
<u>N</u> /A			PM 2: 42 OF STATE SUE, FU

				
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		> C)	<u>1</u> 22	
The date of each amundment(c) adention.		in ph	aga i	مارا و مارا
date this document was signed.		, II O	יתובי וו	uniter
date this document was signed.				1
Effective date if applicable:		75,4		
in serve date it applicable.	o more than 90 days after amendment file date)			<u>;</u>
		in ch	(2)	٧
<u>Note:</u> If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, this date will rest of State's records.	nor-belist	led ia s I	he
Adoption of Amendment(s) (9	CHECK ONE)			
The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)			

Dated

09/19/2024

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)

FLEMING LAGUERRE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)