## N30421

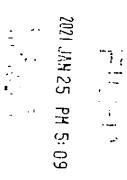
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## COVER LETTER

TO: Amendment Section Division of Corporations

The Spiritual Ass	embly of the Baha'i's of Palm Bay, Florida, Inc.
N30421	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
Mr. Rustom B. Behdin	
	(Name of Contact Person)
The Spiritual Assembly of the Baha'i's of Palm Ba	y, Florida, Inc.
	(Firm/ Company)
1395 Hedgecoth Street, N.W.	
	(Address)
Palm Bay, Florida, 32907	
	(City/ State and Zip Code)
pbehdin@hotmail.com	
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, plea	ase call:
Parwaneh (Pama) Behdin	321 720-0437
(Name of Contact Pers	ion) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
☐ \$35 Filing Fee ■\$43.75 Filing Fee & Certificate of Statu	
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

(Name of Corporation as currently filed with the Fl	orida Dept. of State)	
The Spiritual Assembly of the Baha'i's of Palm Bay, I	Florida, Inc.	
(Document	Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not For Profit Corporation adopts to	he following
A. If amending name, enter the new name of the co	orporation:	
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" or "incorporated" or the abbreviation "Corp.	The new "or "Inc."
B. Enter new principal office address, if applicable	•	
(Principal office address MUST BE A STREET ADD		
	-	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>\(\text{\Delta}\)</u>	
		<del></del>
D. If amending the registered agent and/or register new registered agent and/or the new registered of	red office address in Florida, enter the name of the office address:	
Name of New Registered Agent:		
<del></del>	(Florida street address)	
New Registered Office Address:		
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Regi	istered Agent:	
I hereby accept the appointment as registered agent.	l am familiar with and accept the obligations of the position	t.
		2021
	Signature of New Registered Agent, if changing	JAN 25

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 Y Mike Jo SV Sally So	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>C</u>	Melinda Jackson	544 Australian Road N.W. Palm Bay, Fl 32907
XRemove			
2) Change Add			
Remove 3) Remove Add Remove	<del></del>	<del></del>	
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add	<del></del>		
Remove			
E. If amending or addin (attach additional shee	g additional Arti ts. if necessary).	icles, enter change(s) here: (Be specific)	
			<del></del>

		<del></del>
		•
		_ <del>_</del>
<del></del>		<del> </del>
		<del></del>
		<del> </del>
The date of each amendment(s) adopted date this document was signed.	on:	, if other than the
Effective date if applicable:		
ancerse date it apprearie.	(no more than 90 days after amendment file date)	<del> </del>
ote: If the date inserted in this block do ocument's effective date on the Department.	oes not meet the applicable statutory filing requirements, this date will not be nent of State's records.	e listed as the
doption 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.