

N94 0000006245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

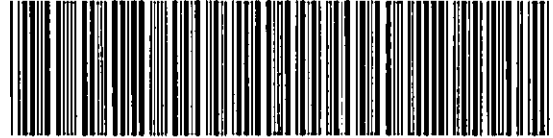
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APR 27 2020
10:00 AM
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OF THE SECRETARY

2020 APR 27 AM 9:30

FILED

APR 28 2020
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 APR 27 PM 12:10

April 15, 2020

DR RAYMOND SAINTIL
624 WILKS AVENUE
ORLANDO, FL 32809

SUBJECT: HAITIAN MISSION BAPTIST CHURCH OF BETHANY, INC.
Ref. Number: N94000006245

We have received your document for HAITIAN MISSION BAPTIST CHURCH OF BETHANY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

YOU CAN TYPE IN THE FORM AND THEN PRINT IT OUT

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 720A00007991

HAITIAN MISSION BAPTIST CHURCH OF BETHANY, INC. OR HEADQUARTERS OF MISSION"

HOPE GLOBAL VISION "

624 WILKS AVENUE , ORLANDO ,FLORIDA 32809

CRITICA FACILIS , SED ARS DIFICILIS EST

GREAT COMMISSION " MATHEW 28 : 18-20

March 22 , 2020

To Florida Department of State , Division of Corporations

Dear Sir Or Madam,

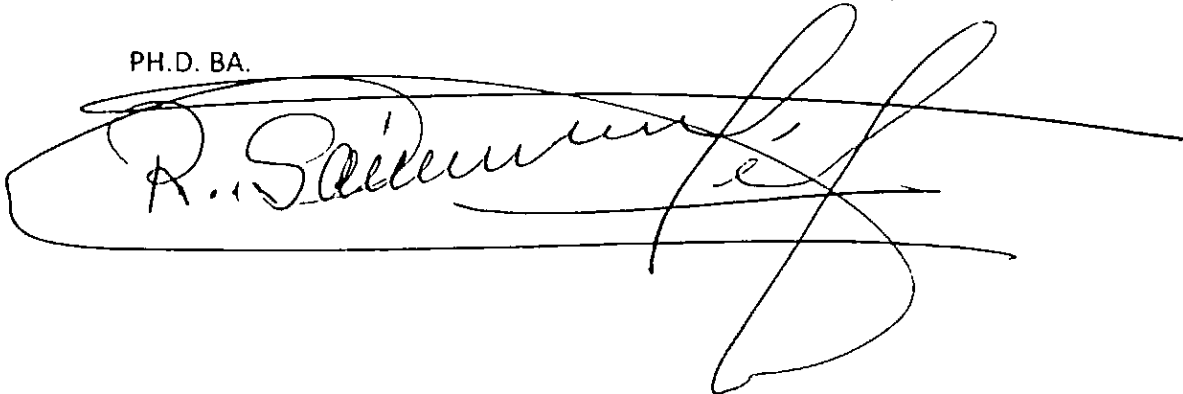
I am writing to you This Letter in order to respond to your request regarding the filing process
Of this Article correctly. This article has been typed up in the correct manner. Please receive it
in the name of our Lord .

Thank you for your prompt Attention to this Mater.

Sincerely,

Dr. Raymond Saintil , M.Div. , M.B.A. J.D. Candidate, Chaplain International and National ,

PH.D. BA.

A large, stylized handwritten signature in black ink, appearing to read "R. Saintil", is written over a horizontal line. The signature is highly cursive and extends significantly to the right.

COVER LETTER

TO: Amendment Section
Division of Corporations

HAITIAN MISSION BAPTIST CHURCH OF BETHANY, INC.

NAME OF CORPORATION: _____

N 94000006245

DOCUMENT NUMBER: _____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DR. RAYMOND SAINTIL

(Name of Contact Person)

HAITIAN MISSION BAPTIST CHURCH OF BETHANY, INC. (RELIGIOUS).

(Firm/ Company)

624 WILKS AVENUE .

(Address)

ORLANDO .FLORIDA 32809

(City/ State and Zip Code)

revraymo541@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dr. Raymond Saintil

407438-3162

(Name of Contact Person) at _____
(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|---|--|---|--|

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

HAITIAN MISSION BAPTIST CHURCH OF BETHANY, INC. (CHURCH PLANTING).

(Name of Corporation as currently filed with the Florida Dept. of State)
OR HEADQUARTERS OF MISSION "HOPE GLOBAL VISION, INC.

(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:

HEADQUARTERS OF MISSION "HOPE GLOBAL VISION, INC.

The new 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) 624 WILKS AVENUE, ORLANDO,

FLORIDA 32809

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

624 WILKS AVENUE, ORLANDO,

FLORIDA 32809

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:

DR. RAYMOND SAINTIL

Name of New Registered Agent:

7421 BROCKBANK DRIVE,

(Florida street address)

New Registered Office Address:

ORLANDO,

32809

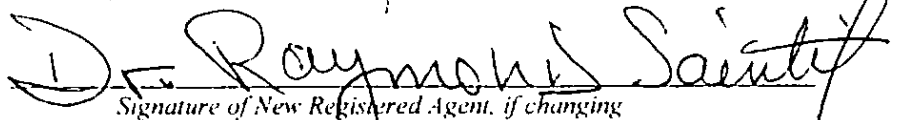
(City)

Florida

(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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>Mrs. Bernadette Saintil</u>	<u>7421 BrockBank Drive,</u> <u>ORLANDO, FLORIDA 32809</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	<u>D</u>	<u>RAYGIVENSON SAINTIL</u>	<u>7421 BROCKBANK DRIVE</u> <u>ORLANDO,FLORIDA 32809</u>
3) <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>ROSANOO SAINTIL</u>	<u>7421 BROCKBANK DRIVE</u> <u>ORLANDO,FLORIDA 32809</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>MARKCAMPBELL SAINTIL</u>	<u>7421 BROCKBANK DRIVE</u> <u>ORLANDO,FLORIDA 32809</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>DR. RAYMOND SAINTIL</u>	<u>7421 BROCKBANK DRIVE</u> <u>ORLANDO,FLORIDA 32809</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u> <u></u> <u></u>

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

HEADQUARTERS OF MISSION * HOPE GLOBAL VISION , INC.

HAITIAN MISSION BAPTIST CHURCH OF BELHANY, INC. (CHURCH PLANTING SAME ENTITY).

I HAVE PLAN TO EXTEND THE CHURCH BY A MISSION IN U.S.A. ACCORDING TO MATHEW 28 :18-20 .

The date of each amendment(s) adoption: MARCH 30 , 2020, if other than the date this document was signed.

Effective date if applicable: MARCH 1ST, 2020.
(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.

MARCH 8, 2020

Dated

Signature

Dr. Raymond Saintil
(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)

DR. RAYMOND SAINTIL

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)