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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPO	PRATION: BETHE.	SDA CHURCH	Ministries, 11
DOCUMENT NUM	IBER: <i>N</i> 960 <i>00</i>	000130	
The enclosed Article	s of Amendment and fee are sub	omitted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	,
Si	EBASTIEN FRAN	Contact Person)	U GASPARD
		OHUROH MINES	
	4120 Nu	7ave Address)	
		A 33168 te and Zip Code)	.
Sm	sea food 1 C You E-mail address: (to be use	choo.com F Lamed for future annual report notifi	inio e Aol. com
	on concerning this matter, pleas		
MAXON (Name	GASPARI) of Contact Person)	at (<u>239</u>) <u>26</u> (Area Code & Dayt	5 6221 ime Telephone Number)
Enclosed is a check	for the following amount made p	payable to the Florida Departme	nt of State:
ন্মি\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mai	ing Address	Street Address	

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	HURCH M	INISTRIES	inc.
(Name of Corporation as cu			tate)
	00001		
(Document N	lumber of Corporati	on (11 known)	
Pursuant to the provisions of section 617.100 the following amendment(s) to its Articles of		this Florida Not For	Profit Corporation adopts
A. If amending name, enter the new name	e of the corporation	<u>ı:</u>	•
The new name must be distinguishable and abbreviation "Corp." or "Inc." <u>"Company</u>			corporated" or the
B. Enter new principal office address, if a (Principal office address <u>MUST BE A STR</u>			
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF) D. If amending the registered agent and/or new registered agent and/or the new recommendation of New Registered Agent:	FICE BOX) or registered office		nter the name of the
New Registered Office Address:	(Flori	da street address)	
,		·	Disable :
		(City)	, Florida ' (Zip Code)
New Registered Agent's Signature, if char I hereby accept the appointment as registe position.			rept the obligations of the
	Signature of New	Registered Agent, if c	hanging

' 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)

<u>Title</u>	Name	<u>Address</u>	Type of Action
PD/ <u>cH/0</u>	MAXON GASPARD	3593 Sw 684 Miraman, Fl 3302	Add Remove
P <u>D</u>	Sébastien François	10160 Torchwood Plantation Fi 333	Add Remove
٧ <u>٩</u>	Michel Bien Quiné	16440 NE 100 Miami, F1 3	ave Add 3162 □ Remove
	ling or adding additional Articles, endditional sheets, if necessary). (Be sp	•	
			is added
as quich	or Gaspard, Me he president /chair arge in the article	man/Director	dions.
	Please see the at		
	THASE SEE THE W	uucha xiiu	
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Bethesda Church Ministries, Inc. FOUNDER BY JESUS CHRIST REV. DR. MAXON GASPARD, APOSTLE

LEGAL TEAM
SEBASTIEN FANCOIS
MINISTER
MICHEL BIEN-AIME
ELDER
MARIE C. MARCELLUS
MINISTER/SEC

14120 NW 7th Avenue • Miami, FLA 33168 • P.O. Box 680307 • Tel: (305) 685-4810 • Fax: (305) 685-4706

Bethesdachurch@minister.com • Website: www.freewebs.com/BethesdaChurch

July 7th, 2009

Re: Rev. Dr. Maxon Gaspard

To Whom It May Concern:

Dear Sir/Madam

This is to certify that I, Reverend Dr. Maxon Gaspard, have been appointed the senior Pastor for Bethesda Church Ministries since July 11, 1999. As the President/Chairman Director/Officer of the congregation, my duties and responsibilities have included and not limited to Pastor, Educator and Chaplain minister to the congregation and community.

I actively participate in charging, discharging and planning on behalf of the congregation, in a way that enhances holistic spiritual care. I promote the pastoral, spiritual and administrative care into life and service of this institution. I have been and I am outstanding in establishing and maintaining professional interdisciplinary relationships. I operate within the institutional hierarchy and boundaries.

Even as an overseer of another congregation in Fort Myers, Florida, I manage my own time and productivity to fulfill my job description. In collaboration with my team ministers, I plan appropriately to the needs of this institution as I evaluate, adapt or change using trial and error methods based on the action/reflection model of progressing. I relate to my collaborators appropriately as authority figure in administrative issues. My goal remains to serve this congregation as pastor-in-charge (not pastor-by-interim) in Ways to promote growth and change in fulfilling the will of God Almighty.

In His service,

Rev. Dr. Maxon Gaspard, Bishop Bethesda Church Ministries, Inc

The date of each amendment(s) adoption: July 7, 2009
(date of adoption is required)
Effective date if applicable: Same as above
(no more than 90 days after amendment file date)
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.
Dated 07 - 97 - 2009
Signature (Signature
By the electrical or vice chairman 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)
MAXON GASPARD
(Typed or printed name of person signing)
President-Chairman
(Title of person signing)