N97000006040

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COVER LETTER

TO: Amendment Section Division of Corporations

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RUSSIAN UKI NAME OF CORPORATION:	RAINIAN BAPTIST CHURCH INC
N97000006040	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
OLGA SLOBODENKO	
	(Name of Contact Person)
	(Firm/ Company)
22066 BOCA PLACE DR APT 912	
	(Address)
BOCA RATON FL 33433	
	(City/ State and Zip Code)
OLGAINNJ@YAHOO.COM	
E-mail address: (to be	e used for future annual report notification)
For further information concerning this matter, p	please call:
OLGA SLOBODENKO	561 955-0816 at
(Name of Contact P	
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta	
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

RUSSIAN UKRAINIAN BAPTIST CHURCH, INC.

Name of Corporation as currently filed with the	e Florida D	ept. of State)		
N9700006040				
(Docum	nent Numbe	er of Corporation (if kno	own)	
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statute	s, this <i>Florida Not For</i>	Profit Corporation adopts the	he following
A. If amending name, enter the new name of th	e corporati	on:		
				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		ion" or "incorporated"	or the abbreviation "Corp.	" or "Inc."
B. Enter new principal office address, if application (Principal office address MUST BE A STREET A				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)			
				<u> </u>
				<u></u>
D. If amending the registered agent and/or reginew registered agent and/or the new register			nter the name of the	<u>ن</u> . ن
		OBODENO		
<u>Name of New Registered Agent</u> :	22066 BO	CA PLACE DR APT 9	12	
			ida street address)	
New Registered Office Address	:			
	BOCA RA	ATON	, Florida	;
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing	Registered	Agent:		
I hereby accept the appointment as registered ager	nt. I am fan	niliar with and accept th	ne obligations of the position A	I.
	elle	asslotad	ce ho	
	$\langle \overline{Sig} $	gnature of New Register	ed 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 D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) × Change Add	<u>P</u>	ANDREY MARSHALL	3800 S. OCEAN DR APT 723 HOLLYWOOD FL 33019
Remove 2) Change Add	RA	DESPOTULI INNA	9855 SAVONA WINDS DR DELRAY BEACH FL 33446
X Remove Change Add Remove	RA	OLGA SLOBODENKO	22066 BOCA PLACE DR . APT 912 BOCA RATON FL 3343;
4) Change Add	ADM	DESPOTULI INNA	9855 SAVONA WINDS DR
 X Remove 5) Change X Add 	ADM	VLADIMIR PANCHENKO	DELRAY BEACH FL 33446 6161 NW 2ND AVE APT 624 BOCA RATON FL 33487
Remove 6) Change Add Remove			
		ticles, enter change(s) here: (Be specific)	

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	OCTORED 17 2020	
The date of each amendment	(s) adoption: OCTOBER 17, 2020	, if other than the
date this document was signed		
unic unii uo cumem mun sigmee		
Effective date if applicable:	10/17/2020	
Effective date in appricable.	(no more than 90 days after amendment file date)	
	(no more than 50 days after amenament fite date)	
	is block does not meet the applicable statutory filing requirements, this date the Department of State's records.	will not be listed as the
document's effective date on the	ne department of state a records.	
Adoption of Amendment(s)	(CHECK ONE)	
(a)	\ 	
☐ The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment oppoval.	nt(s)

ere are no members or members entitled to vote on the amendment(s). The amendment(s) was/were opted by the board of directors.				
Dated 10/17/2020				
Signature \(\frac{\frac{1}{2}}{2}\)				
(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)				
ANDREY MARSHALL				
(Typed or printed name of person signing)				
PRESIDENT				
(Title of person signing)				