N99000006872

| questor's Name) | | | | |
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| (Address) | | | | |
| (Address) | | | | |
| //State/Zip/Phone | e #) | | | |
| WAIT | MAIL | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| _ Certificates | s of Status | | | |
| Special Instructions to Filing Officer: | | | | |
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COVER LETTER

TO: Amendment Section

Division of Corporations

| NAME OF CORPORATION: EGLISE EVANGELIQUE BAPTISTE DE NAZARETH, IN | C |
|---|--------|
| DOCUMENT NUMBER: N99 00006872 | |
| The enclosed Articles of Amendment and fee are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| MICHEL JEAN-PIERRE | |
| (Name of Contact Person) | |
| EGLISE EVANGELI DUE BAPTISTE DE NAZARETH, INC | , , |
| 1551NW 47AV | |
| (Address) | |
| LAUDERHILL FLORIDA 333/3 | |
| (City/ State and Zip Code) | |
| MICHELJ.P. 50 & Ya Roo. Com E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| MICHEL JEAN-PIERRE at 754) 246-5543 | |
| (Name of Contact Person) (Area Code) (Daytime Telephone Number) | |
| Enclosed is a check for the following amount made payable to the Florida Department of State: | |
| \$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \bigcup \\$43.75 Filing Fee & \bigcup \\$52.50 Filing Fee \\ Certificate of Status | |
| Mailing 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 |
|---|---|
| EGlise EVANGELIQUE | BAKTISTE MATARETA 15 ILL 24 PM 3: |
| (Name of Corporation as cu | rrently filed with the Florida Dept. of State) |
| N 09 AAAA6872 | |
| (Document N | lumber of Corporation (if known) |
| (Bocument N | fulliber of Corporation (if known) |
| rsuant to the provisions of section 617.1006, Florida St nendment(s) to its Articles of Incorporation: | tatutes, this Florida Not For Profit Corporation adopts the following |
| If amending name, enter the new name of the corpo | oration: |
| NIA | The new |
| me must be distinguishable and contain the word "corp | poration" or "incorporated" or the abbreviation "Corp." or "Inc." |
| Company" or "Co." may not be used in the name. | |
| Enter new principal office address, if applicable: | NIA |
| rincipal office address MUST BE A STREET ADDRE | ES\$) |
| | |
| | |
| | |
| Enter new mailing address, if applicable: | N/Ω |
| (Malling address MAY BE A POST OFFICE BOX) | <u> </u> |
| | |
| | |
| | |
| 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 off | |
| N CN D A A A | NIA |
| Name of New Registered Agent: | |
| | |
| New Registered Office Address: | (Florida street address) |
| Hew Registered Office Address. | NIA |
| | |
| | (City) (Zip Code) |
| w Registered Agent's Signature, if changing Registe | ered Agent |
| pereby accept the appointment as registered agent. I a | on 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: X Change X Remove X Add | <u>PT</u> <u>V</u> <u>SV</u> | John Doe Mike Jones Sally Smith | |
|-----------------------------------|------------------------------------|---------------------------------------|--------------------------|
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| Change Add Remove | <u>P</u> | Michel Jean Pier | Caklank Park FL 33334 |
| 2) Change | | | _ |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | _ | |
| Add | | | |
| Remove | | | |

| The date of each amendment(s) adoption date this document was signed, | n: 7/20/2015 | , if other than the |
|--|--|---|
| Effective date <u>if applicable</u> : | 7/20/2015 (no more than 90 days after amendment file date) | DIVISION OF GORPAGATION 15 JUL 24 PM 3: 32 |
| Note: If the date inserted in this block document's effective date on the Department | es not meet the applicable statutory filing requirement of State's records. | ents, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were adopted was/were sufficient for approval. | by the members and the number of votes cast for | the amendment(s) |
| There are no members or members er adopted by the board of directors. | ntitled to vote on the amendment(s). The amendment | ent(s) was/were |
| Dated $\frac{7/2}{4}$ | 0/15 | |
| Signature(By the chairman o | helden - Pierre or vice chailman of the board, president or other of | ficer-if directors |
| | ected, by an incorporator – if in the hands of a recented fiduciary by that fiduciary) | iver, trustee, or |
| Michi | EL JEAN-PIERRE (Typed or printed name of person signing | <u>g)</u> |
| REGi. | STERED AGENT | |

(Title of person signing)