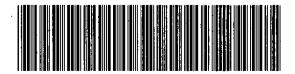
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Certified Copies	_ Certificates	s of Status
Consist Instructions to	Filing Officer	
Special Instructions to	Filing Officer:	
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Office Use Only



200166978472

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FILING CANCELLED RETURNED CHECK

2010 FEB -9 P 4: 23
SECRETARY OF STATE
ANASSEF, FLORIDA

10 July 2-11-10

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AMERICAN C	OHTA	LIC CI	HURCH FO	OR SPIRITUAL H
DOCUMENT NUM	BER: N03000001272		·		
The enclosed Articles	s of Amendment and fee are sub	bmitted fo	r filing.		
Please return all corre	espondence concerning this mat	ter to the	followin	g:	
	DOUGL			.	
	(Name of	Contact 1	Person)		
	DOUGLAS	ANTER	PARA, F	PA	
	(Firm	n/ Compa	ny)	-	
	16675 OLD	CUTLE	R ROA	۸D	
	(4	Address)			
	PALMETTO	O BAY, I	FL 331	57	
	(City/ Sta	te and Zi _l	Code)		
	TAZZBOY				
	E-mail address: (to be use	d for futu	re annua	l report notifica	ation)
For further information	on concerning this matter, pleas	e call:			
DOUGLAS ANTE	PARA	at (305) 608-579	9
(Name	of Contact Person)		(Area	Code & Daytir	ne Telephone Number)
Enclosed is a check for	or the following amount made p	oayable to	the Flori	ida Department	of State:
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Certi (Add	3.75 Fili fied Copy itional co osed)		☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. 1	ng Address Idment Section Identifications Identifications Identifications Identifications Identifications Identifications Identifications Identification Ide		Amen Division Clifton	Address dment Section on of Corporation Building	ns

Tallahassee, FL 32301



February 3, 2010

DIXON BARRETO 3475 W. FLAGLER STREET MIAMI, FL 33125

SUBJECT: AMERICAN CATHOLIC CHURCH FOR SPIRITUAL HEALING, INC.

Ref. Number: N03000001272

We have received your document for AMERICAN CATHOLIC CHURCH FOR SPIRITUAL HEALING, INC. and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6905.

Letter Number: 610A00002754

Thelma Lewis
Document Specialist Supervisor

Division of Comparations DO DOV 6207 Tollahassas Florida 20014

Articles of Amendment to Articles of Incorporation of

AMERICAN CATHOLIC CHURCH FOR SPIRITUAL HEALING, INC.

(Name of Corporation as currently filed with	the Florida Dept. of St	ate)	
N03000001272	<u>)</u>		
(Document Number of Corpora		·	
Pursuant to the provisions of section 617.1006, Florida Statute the following amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For I</i>	Profit Corporation ad	opts
A. If amending name, enter the new name of the corporati	on:		
THE AMERICAN CATHOLIC-JUDAIC ORTH	IODOX ARCHDIOCE	ESE, INC.	
The new name must be distinguishable and contain the wor abbreviation "Corp." or "Inc." "Company" or "Co." may no		corporated" or the FILING CA	NCELLED
B. Enter new principal office address, if applicable:	N/A	RETURNE	D CHECK
(Principal office address MUST BE A STREET ADDRESS)	,		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A	2010 FEB - 9 P 4: 23 SECRETARY OF STATE ALLAHASSEE, FLORIDA	FILED
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		ter the name of the	
Name of New Registered Agent:	N/A	_	
	N/A		
New Registered Office Address: (Flo	rida street address)	,	
	N/A	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am		ept the obligations of	f the

Signature of New Registered Agent, if changing

position.

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	Address	Type of Action
	N/A		☐ Add☐ Remove
	N/A		
	N/A		
(attach	nding or adding additional additional additional sheets, if necessar	Articles, enter change(s) here: y). (Be specific)	
N/A			
		<u> </u>	-
	<u> </u>		<u> </u>
		t	
			,

*	·		

The date of each amendmen	t(s) adoption: 01/20/2009
Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☑ The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_01/2	20/2009
ha	y the chairman or vice chairman of the board, president or other officer-if director we not been selected, by an incorporator – if in the hands of a receiver, trustee, our court appointed fiduciary by that fiduciary)
	F. ZUBIZARRETA
	(Typed or printed name of person signing) PRESIDENT
	(Title of person signing)

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