## N03000003816

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DIVISION OF CORPORATIONS
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SEP 27 2016 CINCULAIR

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	DE ADURACION, INC	
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are	e submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
ELIEZER VELEZ		
	(Name of Contact Person)	
SANTUARIO DE ADORACION, INC.		
	(Firm/ Company)	
6121 AVALON RD.		
	(Address)	
WINTER GARDEN, FL 34787		
	(City/ State and Zip Code)	
eliezer2691@gmail.com		
E-mail address: (to be	e used for future annual report notification)	
For further information concerning this matter, p	please call:	
ELIEZER VELEZ	321 245-4585	
(Name of Contact P		ephone Number)
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:	
\$35 Filing Fee		

Mailing Address

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

Street Address

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

## **Articles of Amendment** to Articles of Incorporation of

SANTUARIO DE ADORACION, INC.

(Name of Corporation	as currently filed with	the Florida Dept. of State)
N03000003816		
(Docur	nent Number of Corpora	tion (if knowπ)
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florid</i>	a Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
Horizon West Community Church, Inc.		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		orporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica	N/A	
Principal office address <u>MUST BE A STREET A</u>		
	<del> </del>	
	<del>- 12.</del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	ROY) N/A	
(muning unitess MAT BE ATOST OFFICE	<u> </u>	
D. If amending the registered agent and/or regi	stered office address in	Florida, enter the name of the
new registered agent and/or the new register		1.01.1041 enter the name of the
Name of New Registered Agent:	N/A	
	6121 Avalon Rd.	
		(Florida street address)
New Registered Office Address:		
	Winter Garden	, Florida 34787
	(City)	(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent		nd accept the obligations of the position.
	g: ^\	
	Signature of N	ew 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	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change		<del></del>	
Add		•	
Remove			
4) Change			
Add			
Remove		•	
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)		
(attach additional sheets, if necessary). (Be specific)		
N/A		
<u> </u>		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the ar was/were sufficient for approval.	nendment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(s) adopted by the board of directors.	was/were
Dated September 19, 2016	
Signature	
(By the chairman or vice chairman of the board, president or other officer- have not been relected, by an incorporator — if in the hands of a receiver, other court appointed fiduciary by that fiduciary)	
Victor A. Rivera	
(Typed or printed name of person signing)	
President	
(Title of person signing)	<del></del>