

N1000000 4058

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

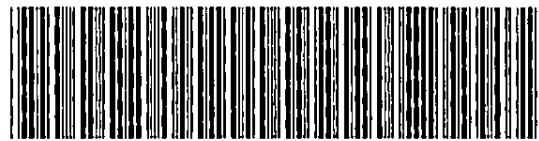
(Document Number)

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Special Instructions to Filing Officer:

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FILED
2019 APR -9 PM 6:44

Amend

APR 10 2019
ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: COMUNIDAD CRISTIANA HOSANNA ASAMBLEAS DE DIOS, INC.

DOCUMENT NUMBER: N10000004058

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MANUEL DARIO JIMENEZ, PASTOR
(Name of Contact Person)

COMUNIDAD CRISTIANA HOSANNA ASAMBLEAS DE DIOS, INC.
(Firm/ Company)

8793 SE 60ST AVE.
(Address)

Ocala, FLORIDA 34472
(City/ State and Zip Code)

MJIM100184@HOTMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MANUEL DARIO JIMENEZ at 352 286-3491
(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
- \$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)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 26, 2019

MANUEL DARIO JIMENEZ
8793 SE 61ST AVE
OCALA, FL 34472

SUBJECT: COMUNIDAD CRISTIANA HOSANNA ASAMBLEAS DE DIOS, INC.
Ref. Number: N10000004058

We have received your document for COMUNIDAD CRISTIANA HOSANNA ASAMBLEAS DE DIOS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 319A00006019

RECEIVED

2019 APR -8 PM 12: 01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 15, 2019

MANUEL D. JIMENEZ
9332 S US HWY 441
OCALA, FL 34480

SUBJECT: COMUNIDAD CRISTIANA HOSANNA ASAMBLEAS DE DIOS, INC.
Ref. Number: N10000004058

We have received your document for COMUNIDAD CRISTIANA HOSANNA ASAMBLEAS DE DIOS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You can not file 2 different forms to change the registered agent. Please verify the changes you wish to make.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 619A00005243

RECEIVED

2019 MAR 26 PM 3:28

SECRETARY OF STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 7, 2019

MANUEL D. JIMENEZ
9332 S US HWY 441
OCALA, FL 34480

SUBJECT: COMUNIDAD CRISTIANA HOSANNA ASAMBLEAS DE DIOS, INC.
Ref. Number: N10000004058

We have received your document for COMUNIDAD CRISTIANA HOSANNA ASAMBLEAS DE DIOS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The form you submitted is for a Limited Liability Limited Partnership, but your entity is a Non Profit Corporation. Please complete and return the enclosed blank form(s).

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 819A00004645

RECEIVED

2019 MAR 15 AM 10:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2019

MANUEL D. JIMENEZ
9332 S US HWY 441
OCALA, FL 34480

SUBJECT: COMUNIDAD CRISTIANA HOSANNA ASAMBLEAS DE DIOS, INC.
Ref. Number: N10000004058

We have received your document for COMUNIDAD CRISTIANA HOSANNA ASAMBLEAS DE DIOS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 919A00003767

RECEIVED
2019 MAR -5 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FL

Articles of Amendment
to
Articles of Incorporation
of

COMUNIDAD CRISTIANA HOSANNA ASAMBLEAS DE DIOS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N 10000004058

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The new

name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

D. 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 office address:

Name of New Registered Agent:

N/A

(Florida street address)

New Registered Office Address:

(City)

, Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

N/A

Signature of New Registered Agent, if changing

2019 APR -9 PM 6:44
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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 PT John Doe
X Remove V Mike Jones
X Add SV Sally Smith

Table with columns: Type of Action (Check One), Title, Name, Address. Contains 6 rows of entries for Juana Rosario, Stephen Valentino, Carmen Lucia Colon, Ivonne R. Fret, Raul Lopez, and Iraida Torres.

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Blank lined area for text entry.

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

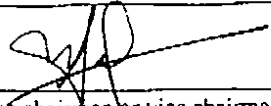
Effective date if applicable: APRIL 4, 2019
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 APRIL 4, 2019

Signature 
(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)

MANUEL DARIO JIMENEZ
(Typed or printed name of person signing)

P.
(Title of person signing)