# N1200000004846

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





700271031787

W15-23358

700271031787 03/30/15--01031--021 \*\*43.75



Mr. Carrasquello gave permisson to use ministerio mana Internacionali The new name

X00789,00167, X00789,01169,00707,00524,0012



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 3, 2015

Orlando Carrasquillo
OC Consulting Firm Inc
2006 Beautiful Ave.
West Palm Beach, FL 33417

SUBJECT: MISION CRISTIANA MANA, INC.

Ref. Number: N12000004846

We have received your document for MISION CRISTIANA MANA, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(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 new name can be Ministerio Mana Internacional Inc OR Mana International Missions, Inc. It can not be BOTH names.

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.

Annette Ramsey Regulatory Specialist II

Letter Number: 615A00006695



May 5, 2015

Orlando Carrasquillo
OC Consulting Firm Inc
2006 Beautiful Ave.
West Palm Beach, FL 33417

SUBJECT: MISION CRISTIANA MANA, INC.

Ref. Number: N12000004846

We have received your document for MISION CRISTIANA MANA, INC. and your check(s) totaling \$43.75. 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 new name of the corporation can be EITHER Ministerio Mana Internacional Inc OR Mana International Missions Inc. You can not use BOTH names as the new name of the corporation.

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.

Annette Ramsey Regulatory Specialist II

Letter Number: 515A00009277

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	AME OF CORPORATION: MISION CRISTIANA MANA, INC						
DOCUMENT NUMBER:		N12000004846					
The enclosed Articles of Am	nendment and fee are su	bmitted for filing.					
Please return all corresponde	ence concerning this mat	tter to the following:					
	ORLANDO CARRASQUILLO						
	Name of Contact Person						
	OC C	ONSULTING FI	RM, INC				
<del></del>		Firm/ Company					
	200	06 BEAUTIFUL	AVE.				
		Address					
	WEST	PALM BEACH,					
		City/ State and Zip Cod	e				
		<b>ULTINGFIRM@</b>					
1	E-mail address: (to be us	sed for future annual report	notification)				
For further information cond	erning this matter, pleas	se call:					
ORLANDO CAR	RASQUILLO	<sub>at (</sub> 561	、542-5465				
Name of Contact Person Area Code & Daytime Telepho							
Enclosed is a check for the f	ollowing amount made	payable to the Florida Depa	artment 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					

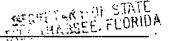
## Articles of Amendment **Articles of Incorporation**

FILED

### MISION CRISTIANA MANA INC.

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

N12000004846



(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

Ministerio Mana Internac			The nev
name must be distinguishable and contain "Company" or "Co." may not be used in	n the word "corporation" or "incorporated <u>a the name</u> .	d" or the abbreviation "Corp."	or "Inc.'
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>			
			<del>-</del>
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)			<del></del>
			_
	d/or registered office address in Florida,	, enter the name of the	<b>-</b>
new registered agent and/or the new		_	_
new registered agent and/or the new	v registered office address:  (Florida street address)	_	_
new registered agent and/or the new Name of New Registered Agent:	v registered office address:  (Florida street address)	_	_

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 Do Mike Jo Sally Sn	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		-	-	
Remove				· · · · · · · · · · · · · · · · · · ·
2) Change Add		_		
Remove 3) Change				
Add		-		
Remove 4) Change		-		
Add Remove				
		_		
Add Remove				
6) Change		_		
Add				
Remove				 

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	date of each amendment(s) add	ption:	, if other than the
date	this document was signed.		
Effe	ective date if applicable:	·	
		(no more than 90 days after amendment file date)	)
Ada	option of Amendment(s)	( <u>CHECK ONE</u> )	
	The amendment(s) was/were add was/were sufficient for approval	pted by the members and the number of votes cast for	the amendment(s)
	There are no members or members adopted by the board of director	ers entitled to vote on the amendment(s). The amendments.	ent(s) was/were
	Dated	04/17/2015	
	Signature	Mend I hus	
	(By the chairf have not bee	nan or vice chairman of the board, president or other of selected, by an incorporator – if in the hands of a receppointed fiduciary by that fiduciary)	fficer-if directors eiver, trustee, or
		ROLAND RIVERA	
		Typed or printed name of person signing)	
		PRESIDENT	
		(Title of person signing)	