N140000551B

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

Office Use Only



400261235924

06/27/14--01021--002 **35.00

14 JUH 27 PH 12: 39

SECRETARY CO STATE

JUL 1 6 2014 T. CARTER

COVER LETTER

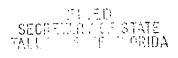
TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 24 ANCIAN	OS CHURCH	INC
DOCUMENT NUMBER: N1400005518	3	
The enclosed Articles of Amendment and fee are subm	itted for filing.	
Please return all correspondence concerning this matter	to the following:	
George Fernandez		
	Name of Contact Person)
Jibacoa Inmigraction Service		
	(Firm/ Company)	
190 East 4 Ave		
	(Address)	
HIALEAH/ FLORIDA 33010		
(City/ State and Zip Code	:)
E-mail address: (to be used	for future annual report r	notification)
For further information concerning this matter, please c	all:	
	at (ì
(Name of Contact Person)	(Area Co)
Enclosed is a check for the following amount made pay	able to the Florida Depa	rtment of State:
S35 Filing Fee S43.75 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	Amend Divisio	Address ment Section n of Corporations Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



14 JUN 27 PH 12: 39

24 ANCIANOS CHURCH INC			proportar	,
(Name of Corporation as currently	filed with the Flor	ida Dept. of State)		_
N14000005518				
(Docu	ment Number of Co	rporation (if known)		
ursuant to the provisions of section 617.1 mendment(s) to its Articles of Incorporati		s, this <i>Florida Not For a</i>	Profit Corporation adopts the	e follow
. If amending name, enter the new name	ne of the corporation	on:		
				The n
ame must be distinguishable and contain Company" or "Co." may not he used in		ion" or "incorporated"	or the abbreviation "Corp."	or "Inc
. Enter new principal office address, it Principal office address <u>MUST BE A ST</u>	f applicable:			_
Tincipal office address <u>MOST BE A ST</u>	REET ADDRESS)			_
				_
. Enter new mailing address, if applic (Mailing address MAY BE A POST C				
				_
				_
				_
. If amending the registered agent and			nter the name of the	
new registered agent and/or the new	ABEL GONZA			
Name of New Registered Agent:				
	1030 NE 215 S			
New Registered Office Address:	1	(Florida street address)		
	MIAMI		, Florida 33179	
	(City)		Zip Cod	lc)
D	Dualitared	Ananti	•	
ew Registered Agent's Signature, if ch hereby accept the appointment as registe	ered agent. I am far	<u>Ngent:</u> piljar with and accep ry	he obligations of the position	
	G	1 11		
	Signature of New I	Registered Agent, if cha	nging	

Page 1 of 4

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>V</u> <u>Mik</u>	<u>n Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PD	JOSE D OLACIREGUI	3139 SW 26 ST
Add			MIAMI, FL 33133
X Remove			
2) X Change	PD	ABEL GONZALEZ	17650 NW 40 AVE
Add			MIAMI GARDENS, FL
Remove			33055
3) Change			
Add			
Remove			
4) Change	<u></u>		
Add			
Remove			
5) Change	****		
Add			
Remove			
6) Change		**************************************	
Add			
Remove			

f amending or adding additional Arti utach additional sheets, if necessary).	(Be specific)		
,			
••••			
			···· —
		 	

date this document was signed		, if other than the
Effective date if applicable:	06/16/2014	
in approach.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/w was/were sufficient for a	vere adopted by the members and the number of votes cast for the amendment(s) approval.	
There are no members or adopted by the board of	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
Dated $\frac{06/1}{h}$	16/2014 (1) (1) (1)	
ha ∀ e i	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
JOSE D	OLACIREGUI	
	(Typed or printed name of person signing)	
PD		
	(Title of person signing)	