## 82F F00000P1N

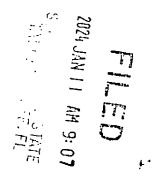
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Incarect Fam

Office Use Only



500418283315

11/09/23--01007--017 ++43.75



AP

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: TOLOGICA	Boutistala Cosecha Inc			
1 Tulbon	DUDU150			
DOCUMENT NUMBER: VIGOO	000 110 8			
The enclosed Articles of Amendment and fee are subm	mitted for filing.			
Please return all correspondence concerning this matter	er to the following:			
Noemi Palaci	(Name of Contact Person)	_		
·	Sionera Grista Sala Inc. (Firm/Company)			
WC 7001	4th Street			
	(Address)			
Meechabe	20, FL 349n4			
	(City/ State and Zip Code)			
E-mail address: (to be used	For future annual report notification)			
For further information concerning this matter, please	call:			
Noemi Palacio M. (Name of Contact Person)	(Area Code) (Daytime Telephone Number)	ا		
Enclosed is a check for the following amount made page	ayable to the Florida Department of State:			
□ \$35 Filing Fee □\$43.75 Filing Fee & □ Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)			
Mailing Address	Street Address			
Amendment Section Division of Corporations	Amendment Section Division of Corporations	Amendment Section Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee			
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

_	of		i- 11	En
Ialesia Boutisto	1 (a	<u>COSe</u>	cha II	100
(Name of Corporation as currently filed with the Florida	Dept. of State)		2024 JAN 11	Aid o. o
MAMMAN	58		Sic	, 5.0
(Document Num	ber of Corporation	on (if known)	7	E STATE
Pursuant to the provisions of section 617,1006, Florida Statu	tae thie Flowida	Not For Profit Co		bo following
amendment(s) to its Articles of Incorporation:	ies, mis <i>Prortuu</i>	warm right Co	тригиний адорся п	ne tonowing
A. If amending name, enter the new name of the corpora	tion:	C \		
Talesia Misionera (	vizio_	$\omega$	Inc	The new
name must be distinguishable and contain the word "corpor	ation" or "incorp	porated" or the ab	breviation "Corp.	" or "Inc."
"Company" or "Co." may not be used in the name.	(	1		
B. Enter new principal office address, if applicable:		+	<u>.                                    </u>	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	D			
C. Enter new mailing address, if applicable:	ι Λ			
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	······································	
	1- 1			
				_
D. If amending the registered agent and/or registered off	iico address in F	lorida enter the	name of the	
new registered agent and/or the new registered office		iorida, enter the	manic of the	
N CN D N LL	NA			
Name of New Registered Agent:	<u> </u>			
New Registered Office Address:		(Florida street ac	aress)	
<del></del>	(City)		, Florida <u> </u>	
	reny/		(21) Code)	
New Registered Agent's Signature, if changing Registered		annount the ablication	iona of the market	
Thereby accept the appointment as registered agent. I am fo	unuar wun and	ассері іне обидаі	ions oj ine positior	I <b>.</b>
	Signature of New	Registered Agent,	if changing	<del></del>
••			y	

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 John V Mike SV Sally		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<del></del>	Joel Perez	
Remove  2) Change Add	<u>D</u> _	DominggPortocar	Trend 6530 F Conter Frag
Remove 3 ) Change Add Remove			
4) Change Add			
Remove			
5) Change Add	<del></del>		
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet	ng additional Ai	rticles, enter change(s) here: . (Be specific)	
	NIA		

•	
	-
•	
	<del></del>
	<del></del>
	· <del></del> ·
	<del></del> _
	<del></del>
	<del></del>
	·
	10 4 4 4
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)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no	t he listed as the
document's effective date on the Department of State's records.	. Se miled an tile
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 12/21/2023
Signature Dos Dorres.
(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)
Doming For + 100 (Typed or printed name of person signing)
(Title of person signing)



December 4, 2023

NOEMI PALACIOUS MENDOZA 1007 SW 4TH STREET OKEECHOBEE, FL 34974

SUBJECT: IGLESIA BAUTISTA LA COSECHA INC.

Ref. Number: N14000007758

We have received your document for IGLESIA BAUTISTA LA COSECHA 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 form you submitted is for a FLORIDA PROFIT CORPOATION, but your entity is a FLORIDA NONPROFIT CORPORATION. Please complete and return the enclosed blank form(s).

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

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.

Anissa Butler Regulatory Specialist II

, V · ·

Letter Number: 623A00027579