## N170000004405

(Re	questor's Name)	
DA)	dress)	
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(Cit	y/State/Zip/Phone	#)
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Tglesia Cristaina Pentecustal Manantial De Aguas Viva
DOCUMENT NUMBER: N 17 00000 4405
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Raymond Colon (Name of Contact Person)
Iglesia Cristaiina Pentecostal Manantial De Aguas Vivas
7906 Woodvale Cir.
Tampa FL 33615 (City/ State and Zip Code)
rcolono511@ 9-mail. Com  R-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Raymon Cdin  at 813 - 562 - 2758  (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 & □\$43.75 Filing Fee & □\$82.50 Filing Fee Certificate of Status
Mailing Address Amendment Section Amendment Section Division of Comparison Division of Comparisons

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

to Articles of Incorporation

AHAN	ies of facor poration	
Iglesia Cristaina Penteco	DSIGI MUTUILING MUUD VIVO	nc
(Name of Corporation as curre	ently filed with the Florida Dept. of State)	
Ni	17000004405	•
(Document Num	mber of Corporation (if known)	•
Pursuant to the provisions of section 617,1006, Florida Statu amendment(s) to its Articles of Incorporation:	utes, this Florida Not For Profit Corporation adopts the following	
A. If amending name, enter the new name of the corpora  Talesia Cristiani Penteco name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	ostal Marantial De Agijas VIVAS The new	1.7
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	$\mathcal{N}\mathcal{A}$	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	NIA	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	ffice address in Florida, enter the name of the	
Name of New Registered Agent:	NIA	
<u>New Registered Office Address:</u>	(Florida street address)  N/A	
•	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f	familiar with and accept the obligations of the position	
	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	nes		
Type of Action (Check One)	Title		<u>Name</u>		Address
(Check Che)				,   ^	
1) Change	<del></del>	_		NA	
Add					
Remove					
2) Change		_		N/A	
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6) Change		_		1 - 11 \	· · · · · · · · · · · · · · · · · · ·
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attach additional she	ng additional Articles, e ets. if necessary).    (Be s	specific)	
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The date of each amendment(s) adoption: <u>AUGUST Z, ZOIT</u>	if other than the
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 w document's effective date on the Department of State's records.	ill 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 amendment(s) was/were sufficient for approval.	s)
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 August 2, 2017	
Signature X Raymond Colin	
(By the charman 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)	
Raymond Cdon	
(Typed or printed name of person signing)	
President	
(Title of person signing)	