N1900002479

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COVER LETTER

TO: Amendment Section

Division of Corporations 19000002479 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person) (Firm/ Company) (Address) (City/ State and Zip Code) to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □S43.75 Filing Fee & □S43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

IBLESIA PENTECOSTAL EL PETUS	10 Oel Justo Inc
(Name of Corporation as currently filed with the	e Florida Dept. of State)
N 19 00000 24779.	
(Document Number of Corporation	ı (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida N</i> amendment(s) to its Articles of Incorporation:	ot For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation" or "incorporation" or "company" or "Co." may not be used in the name.	orated" or the abbreviation "Corp," or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Flo	orida, enter the name of the
new registered agent and/or the new registered office address:	rida, enter the name of the
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: thereby accept the appointment as registered agent. I am familiar with and a	eccept the obligations of the position.
Signature of New 1	Registered Agent, if changing

tAttach additional sheets Please note the officer/di P = President; V = Vice I Executive Officer; CFO : held, President, Treasure	rector title by the President; T= Tre = Chief Financial	asurer; S= Secreta Officer. If an offic	ry; D= Director; TR= Tru	stee; C = Chairman or Clerk; on one title, list the first letter of	CEO = Chief each office
	ives the corporati	on, Sally Smith is n		PST and Mike Jones is listed as hould be noted as John Doe, P	
Example: X Change X Remove X Add	PT John D V Mike J SV Sally S	<u>ones</u>			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Y Change	<u>16</u>	Elizaketh	SAUCHOO	3040 WALKER &	NE
Add Remove				5x463	
2)Change	<u> </u>	Anaeuson	Benites Herke	KA ZOHO WALK	ex Ave
✓ Add Remove				5xeenables, 33463.	F2.
3) Change					<u> </u>
Add				<u> </u>	<u>.</u>
Remove					
4) Change					<u> </u>
Add Remove					
5) Change					
Add					<u> </u>
Remove					<u> </u>
6) Change					
Add					<u> </u>
Remove					

Page 2 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).	(Be specific)	
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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 not locument's effective date on the Department of State's records.	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.	
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 4 4 19.	
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)	
Elizabeth Saucedo (Typed or printed name of person signing)	
(typed or printed name of person signing)	
Vise president	
(Title of person signing)	