Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN IGLESIA CRISTIANA EMBAJADORES DE CRISTO CORP.

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Corporate Filing Menu

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COVER LETTER

O: Amendment Section Division of Corporations		
IGLESIA CRISTIANA EMBAJADORES DE CRISTO CORP.		
AME OF CORPORATION:		
OCUMENT NUMBER:		
he enclosed Articles of Amendment and fee are submitted for filing.		
lease return all correspondence concerning this matter to the following:		
GUILLERMO A PLASENCIA		
(Name of Contact Person)		
(Firm/ Company)		
342 GREENWICH CT		
(Address)		
KISSIMMEE, FL 34758		
(City/ State and Zip Code)		
guillermoplasencia29@gmail.com		
E-mail address: (to be used for future annual report notification)		
or further information concerning this matter, please call:		
UILLERMO PLASENCIA 407-791-1725		
(Name of Contact Person) (Area Code) (Daytime Telephone Num	iber)	
Inclosed 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 & □\$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)		

Malling Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314

Street Address
Antendment Section Division of Corporations The Centre of Tailahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

H 220002545 843

Articles of Amendment to Articles of Incorporation

2022 JUL 27 PH 12: 05

IGLESIA CRISTIANA EMBAJADORES DE CRISTO	CORP.	· .
Name of Corporation as currently filed with the Flor	rida Dept. of State)	
N19000006410		
(Document)	Number of Corporation (if kn	own)
tursuant to the provisions of section 617.1006, Florida S mendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	Profit Corporation adopts the following
. If amending name, enter the new name of the cor	poration:	
		The new
ame must be distinguishable and contain the word "co Company" or "Co." may not be used in the name.	poration" or "incorporated	or the abbreviation "Corp," or "Inc."
B. Enter new principal office address, if applicable:		
Principal office address MUST BE A STREET ADDR	(<u>E33</u>)	
		
. Enter new mailing address, if applicable;		
(Mailing address MAY BE A POST OFFICE BOX)	
 If amending the registered agent and/or registere new registered agent and/or the new registered or 	d office address in Florida.	enter the name of the
	inter account sort	
Name of New Registered Agent:		
New Registered Office Address:	(FIG	vida street address)
THE THE PARTY OF T		
_	(City)	Florida (Zip Code)
	(City)	(Lip Code)
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept	the obligations of the position.
	Signature of New Registe	red Agent, if changing

H 220003545843

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 latter 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 Do V Mike Jo SY Sally Sr	ncs	
Type of Action (Check One)	Title	Name	Address
1) Change Add	<u>s</u>	NIURKA V. ARIAS-ESPINOSA	352 ALDERSHOT CT KISSIMMEE, FL 34758
Remove	•		
2) Change Add	<u>\$</u>	GIRANDI I GALVAN	POINCIANA, FL 34759
Remove Change Add Remove	<u>T</u>	ANGELA ADAMEZ	414 JAY CT KISSIMMEE, FL 34759
4) Change Add			
Ксточе			
5) Change			
Remove			·
6) Change Add			
Remove			
E. If amending or adding (attach additional sheet		cles, enter change(s) here: (Be specific)	
		- -	

H 22000254 5843 _____, if other than the The date of each amendment(s) adoption: ____ date this document was signed. JULY 27, 2022 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 be listed as the document's effective date on the Department of State's records.

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

H22000254584

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

JULY 27, 2022

Dated

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)

GUILLERMO PLASENCIA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)