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COVER LETTER

TO: Amendment Section. Division of Corporations

Minister NAME OF CORPORATION:	io Internacional Familias I	En Cristo Ministry In	¢ c
N200000116 DOCUMENT NUMBER:	39		
The enclosed Articles of Amendment and			
Please return all correspondence concerni	ng this matter to the follow	ving:	
Alejandro Aguilar			
	(Name of Co	ntact Person)	
Ministerio Internacional Familias En Cris	ito Ministry Inc		
	(Firm/ Co	ompany)	
7340 Stirling Rd, Apt 204			
	(Add	ress)	
Hollywood, FL 33024			
	(City/ State ar	nd Zip Code)	
aguilaralex20@gmail.com			
E-mail address	: (to be used for future ann	nual report notificatio	n)
For further information concerning this m	atter, please call:		
Alejandro Aguilar		954 at	470-2924
(Name of Co	ntact Person)		(Daytime Telephone Number)
Enclosed is a check for the following amo	unt made payable to the F	lorida Department of	State:
■ \$35 Filing Fee	ing Fee & S43.75 Filir of Status Certified Co (Additional enclosed)	opy Centif copy is Centif	icate of Status ied Copy tional Copy is
Mailing Address		Street Address	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

Articles of Amendment to Articles of Incorporation of

. .

Ministerio Internacional Familias En Cristo Ministry Inc

(Name of Corporation as currently filed with the Florida Dept	<u>. of State</u>)	2022 DEC -5	Ari 1:22
N20000011639		•	07.07.17.7
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statutes, that amendment(s) to its Articles of Incorporation:	is Florida Not For Profit	<i>Corporation</i> add	pts the followin
A. If amending name, enter the new name of the corporation:			
	 		The new
name must be distinguishable and contain the word "corporation" "Company" or "Co." may not be used in the name.	or "incorporated" or the	e abbreviation "C	orp." or "Inc."
P. Enter new principal office address if annihilation			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
			·
<u> </u>			<u> </u>
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			·-··
·			· · · · · · · · · · · · · · · · · · ·
 If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addresses 	ldress in Florida, enter t	he name of the	
new registered agent and/or the new registered office addre	<u>:SS:</u>	•	
Name of New Registered Agent:		·····	
			
New Registered Office Address:	(Florida strei	et address)	
		5 1 11	
((City)	, Florida (Zip Coe	de)
	••		-
New Registered Agent's Signature, if changing Registered Age Thereby accept the appointment as registered agent. I am familia	<u>nt:</u> r with and accept the obli;	gations of the pos	ition.
- · ·		, , , , , , ,	
Signate	are of New Registered Age	ent, 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 Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	T	John Jairo Tovar	7340 Stirling Road, Apt 204 Hollywood, FL 33024
x Remove			
2) Change Add			
Remove 3) Change Add Remove		<u></u>	
4) Change Add	···		
Remove			
5) Change Add			
Remove			
6) Change Add	_		
Remove			
E. If amending or addin (attach additional sheet	g additio s, if nece.	nal Articles, enter change(s) here: ssary). (Be specific)	
	<u>-</u>		· -

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The date of each amendmen date this document was signed	t(s) adoption:	/01/2022					, if other than the
Effective date if applicable:	10/01/2022						
	(no n	ore than 90 d	ays after ame	ndment file da	ite)		
Note: If the date inserted in the document's effective date on the	his block does not the Department of	meet the appl State's record	icable statuto ls.	ry filing requi	rements, this	date will not b	e listed as the
Adoption of Amendment(s)	(<u>CH</u>	ECK ONE)					
☐ The amendment(s) was/v was/were sufficient for a	vere adopted by th	e members an	d the number	of votes cast	for the amend	lment(s)	

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)

Alejandro Aguilar

(Typed or printed name of person signing)

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were