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T. SCOTT



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COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPOR | 1101000 | erio Tus manos me sostienen | inc. |
|---------------------------|--|--|------|
| The enclosed Articles of | Amendment and fee are sub | bmitted for filing. | |
| Please return all corresp | ondence concerning this mat | tter to the following: | |
| - - | 4102 Bold | Name of Contact Person US man as me sosti enen into Firm/ Company by's or Apt 103 Address ee FC 34741 City/ State and Zip Code | |
| For firsther information | | me Sosti enen e mail. com sed for future annual report notification) | |
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| | MAI donado | at 787 605-2076 Area Code & Daytime Telephone Number | |
| | , | payable to the Florida Department of State: | |
| □ \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) | |
| Amer Divis P.O. I | ing Address nament Section ion of Corporations Box 6327 hassee, FL 32314 | Street Address 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

| (Name of Corporation as currently filed with the Florida Dept. of State) N 2 0000 45 7 2 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation: A. If amending name, enter the new name of the corporation; Ministry Ministry | Ministerio Tus m | nanos | me | Sostienen | INC | | |
|---|---|-------------------|---------------------|------------------------|---------------------------------------|--------------------------|--|
| (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation: A. If amending name, enter the new name of the corporation: **MINISTERIO** TUS** TWOOS** TWO SOCIETY OF THE new name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp." "Inc." or Co." or the designation "Corp." "Inc." or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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: Name of New Registered Agent (Florida street address) New Registered Agent and/or the new registered office address: (City) New Registered Agent and/or the new registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing Check if applicable | \ | | ntly filed w | rith the Florida Dept | of State | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments) its Articles of Incorporation: A. If amending name, enter the new name of the corporation: MINISTERIO TUS WOODS WE SOCIED TWO. The new name must be distinguishable and contain the word "corporation," company," or "incorporated" or the abbreviation "Corp." "Inc.," or "Co.," or the designation "Corp." "Inc.," or "Co.," A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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, If applicable: (Mailing address, If applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address: Name of New Registered Agent (Florida street address) New Registered Agent and/or the new registered office address: (Florida street address) New Registered Agent and/or the new registered Agent: (City) New Registered Agent's Signature, If changing Registered Agent: 1 am familiar with and accept the obligations of the position. Signature of New Registered Agent, If changing Check if applicable | | | | <u></u> | | | |
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| ` | | - • | _ | | | | |
| | | s. 607.0120 (1 | l) (e), F.S. | | | | |

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)

Example:

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.

| X Change | <u>PT</u> | John Doe | | |
|-------------------------------|-------------|-------------|-------------|---|
| X Remove | Y | Mike Jones | | |
| _X Add | SV | Sally Smith | | , |
| Type of Action (Check One) | Title | <u>Name</u> | Address | • |
| 1) Change | | | | |
| Add | | | | • |
| Remove | | | | |
| 2) Change | | | | - |
| Add | | | | |
| Remove Change | | - | | - |
| Add | | | | - |
| Remove | | | | |
| 4) Change | | | | • |
| Add | | | | - |
| Remove | | | | |
| 5) Change | | | | - |
| Add | | | | - |
| Remove | | | | |
| 6) Change | | | | _ |
| Add | | | | - |
| Кетюче | | | | |

| | es, enter change(s) here: (Be specific) | |
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| an amendment provides for an each | inge, reclassification, or cancellation | of issued shares, |
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| The date of each amendment(s) ad | option: | if other than the |
|---|--|-------------------------------------|
| date this document was signed. | | |
| Effective date <u>if applicable</u> : | | _ |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this blocument's effective date on the De | ock does not meet the applicable statutory filing requirements, partment of State's records. | this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were ado action was not required. | pted by the incorporators, or board of directors without sharehold | der action and shareholder |
| The amendment(s) was/were ado by the shareholders was/were su | pted by the shareholders. The number of votes east for the amen fficient for approval. | dment(s) |
| | roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment(| |
| "The number of votes cast | for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (wing group) | |
| Dated | Jy 1, 2021 | |
| Signature | Ol as densel | |
| (By a di | rector, president or other officer – if directors or officers have no d, by an incorporator – if in the hands of a receiver, trustee, or othed fiduciary by that fiduciary) | |
| | Camille Maldonado (Typed or printed name of person signing) | |
| | (Typed or printed name of person signing) | |
| | <u> </u> | |
| | (Title of person signing) | _ |