## N94000002700

(Requestor's Name)  9735 N.W. 505.7 SUITS 107  Deval Floor 3317B.	400142877974
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	02/05/0901029018 **45.7S
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer;	M
Correction document by teleprone can An 3/10/09	SECRE TARY OF CORP

Office Use Only

BROBERS MAR 1:0.2009



February 10, 2009

MINISTERIO INTERNACIONAL JEMIMAH T.V., INC. 9735 N.W. 52 ST STE 107 DORAL, FL 33178

SUBJECT: MINISTERIO INTERNACIONAL JEMIMAH T.V., INC.

Ref. Number: N9400002700

We have received your document for MINISTERIO INTERNACIONAL JEMIMAH T.V., INC. and your check(s) totaling \$45.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 809A00004679

SECRETARY OF STATE TALL AND TA

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: MINISTERIO International JEHIMAH T.V.
DOCUMENT NUMBER: N940000 700
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DIANA JELEN (Name of Contact Person)
JELEN AND BALZA ADDUNTING SERV. (Firm/Company)
8181 NW 36 ST SwiTE 6-B
8181 NW 36 ST SWITE 6-B (Address)  DORAL, FL. 33166
(City/ State and Zip Code)  For further information concerning this matter, please call:
Name of Contact Person)  at (30v) 322-7034  (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 \$Certificate of Status \$43.75 Filing Fee \$Certificate of Status (Additional copy is enclosed) \$52.50 Filing Fee \$Certificate of Status (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

Articles of Amendment to Articles of Incorporation

09 MAR -9 PM 3: 05

## MINISTERID INTERNACIONAL JEMINAH T.V., INC. (Name of Corporation as currently filed with the Florida Dept. of State)

1940000700

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name  MINISTERIO INTERM  The new name must be distinguishable and	,		H. CORP.
The new name must be distinguishable and abbreviation "Corp." or "Inc." <u>"Compuny"</u>	contain the v	word "corporation" or "in y not be used in the name.	acorporated" or the
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>		<u>SS</u> )	
C. Entar you mailing address if applicable	, los		<u> </u>
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF			
	٠		
D. If amending the registered agent and/or new registered agent and/or the new registered agent			nter the name of the
Name of New Registered Agent:	<del> </del>	<u> </u>	<del></del>
New Registered Office Address:	. (	Florida street address)	<del></del>
		(City)	, Florida (Zip Code)
New Registered Agent's Signature, if chang I hereby accept the appointment as register position.			cept the obligations of the
<del></del>	Signature of	New Registered Agent, if c	hanging

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u> TSD</u>	ALVARO LINERO	9735 NW 52 ST \$ 107 DORAL, FL 33, 18	Add Remove
<u>TSD</u>	ANA MARIA BAGNUOLI	9735 NWS25T \$107 DOEAL, FL 33178	Add Remove
	<del>-</del>		Add Remove
E. <u>If amend</u>	ing or adding additional Articles, enter o	change(s) here:	
	ditional sheets, if necessary). (Be specifi		
			· · · · · · · · · · · · · · · · · · ·
			······

The date of each amendment(s) adoption: 01/30/2009
Effective date if applicable: 01/30/2009
(no more than 90 days after amendment file date)
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 $02/26/2009$ Signature $16000$
(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, o other court appointed fiduciary by that fiduciary)
CEONOR UNERO
(Typed or printed name of person signing)
PD
(Title of person signing)

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