# N08000011369

(Re	questor's Name)	
,	,	
. (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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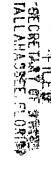
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ANEND CELS

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: MINISTERIO 1	NUEVO AMANECER,C	ORP
DOCUMENT NUM	BER: N08000011369		
The enclosed Articles	s of Amendment and fee are sub	mitted for filing.	
Please return all corre	espondence concerning this matt	er to the following:	
	BARBAR	RA PALOMINO	
	(Name of	Contact Person)	
	MINISTERIO NUE	VO AMANECER,CORP	
	(Firm	/ Company)	
	2294 W	8TH COURT	
	(A	Address)	
	HIALEA	AH FL 33010	
	(City/ Stat	e and Zip Code)	
	babyude E-mail address: (to be used	el@yahoo.es d for future annual report notifica	ition)
For further information	on concerning this matter, please	e call:	
BARBARA PALC	MINO	at ( 305 ) 219 860	3
(Name	of Contact Person)	(Area Code & Daytir	ne Telephone Number)
Enclosed is a check f	or the following amount made p	ayable to the Florida Department	of State:
	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis	ing Address Indment Section It ion of Corporations Box 6327	Street Address Amendment Section Division of Corporation Clifton Building	
Talla	hassee, FL 32314	2661 Executive Center Tallahassee, FL 32301	

### Articles of Amendment to Articles of Incorporation

Artic	cies of incorporation	
MINISTERO /	of    UELO THAT ECE & ently filed with the Florida Dept. of St	ate)
N08	000011369	
(Document Nun	nber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, he following amendment(s) to its Articles of Ir		Profit Corporation adopts
A. If amending name, enter the new name of	f the corporation:	
The new name must be distinguishable and coabbreviation "Corp." or "Inc." "Company" o		corporated" or the
B. Enter new principal office address, if app		<del></del>
Principal office address <u>MUST BE A STREE</u>	T ADDRESS )	99 ZĀ
		ALLAHASS ALLAHASS  -9
C. Enter new mailing address, if applicable		9 PH
(Mailing address <u>MAY BE A POST OFFI</u>	<u></u>	
D. If amending the registered agent and/or i		ater the name of the
new registered agent and/or the new regi	stered office address:	
Name of New Registered Agent:	BARBARA PALOMINO	
New Registered Office Address:	(Florida street address)	_
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing thereby accept the appointment as registered		ept the obligations of the
position.	Madour	
S	Signature of New Registered Agent, if ch	anging

Page 1 of 3

#### 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)

**Type of Action** Title **Name** <u>Address</u> **RODRIGUEZ RAUL** \_ 🗆 Add 2294 W 8TH CT HIALEAH FL 33010 \_\_ 🗹 Remove **ESTEVEZ EUDOCIA** VP 821 E 18TH STREET \_\_\_\_\_ 🗋 Add \_\_\_\_ ☑ Remove HIALEAH FL 33013 **FERNANDEZ LIUBA** ✓ Remove HIALEAH FL 33013 E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

#### 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>	Name	Address	Type of Action
<u>s</u>	RODRIGUEZ NANCI J	6568 W 22 CT HIALEAH FL 33016	□ Add ☑ Remove
<u>T</u>	RODRIGUEZ ALBERTO D	821 E 18TH STREET HIALEAH FL 33013	
<u>P</u>	BARBARA PALOMINO	2294 W 8TH CT HIALEAH FL 33010	
E. If amer (attach	nding or adding additional Articles, ente additional sheets, if necessary). (Be spec	er change(s) here:	
		· ·	

## 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
VP	YUDEL PALOMINO	6588 W 22 LANE	☑ Add
		HIALEAH FL 33016	
			<del>.,</del>
D	YUNET PALOMINO	6588 W 22 LANE	[7] Add
		HIALEAH FL 33016	_
		INALLAR L 350 TO	
Т	ENRIQUE HIDALGO-GATC	2294 W 8TH CT	☑ Add
<del></del>	ENTITION OF THE PROPERTY OF TH	HIALEAH FL 33010	
		HIALEAN FL 330 IV	
E Ifama	nding or adding additional Articles anta	r changa(e) hara:	•
(attach	nding or adding additional Articles, enter additional sheets, if necessary). (Be spec	cific)	
(		,	
· · · · · · · · · · · · · · · · · · ·			

The date of each amendmen	t(s) adoption: OCTOBER 21,2009
Effective date <u>if applicable</u> :	(data of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
✓ The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
hav	y the chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, or her court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

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