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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: $3^{RA} I$	glesia pe	ente costal Val	le de
	<i>J</i>		CodRI
DOCUMENT NUMBER: N 1800	000000	56	
The enclosed Articles of Amendment and fee are subm	itted for filing.		
Please return all correspondence concerning this matter	to the following:		
adela.	Lina		
((Name of Contact Persor	1)	-
2 1			
Chur	(Firm/ Company)		
	(Firm/ Company)		
21/10 -	. 1		
2449 TORRE	ns way		
	(Address)		
Kicsimmas	E(30	1746	
KISS Immee	City/ State and Zip Code	<u> </u>	
	,		
Valle de cedi	RONO Y	ahon. com	
E-mail address: (to be used	for future annual report i	notification)	
For further information concerning this matter, please of	rall:		
0			/ -2
<u>Udela Lima</u>	~at	407 - 459-20 (Daytime Telephone Number)	48
(Name of Contact Person)	(Ar	ea Code) – (Daytime Telephone Number)	
Enclosed is a check for the following amount made pay	able to the Florida Depa	rtment of State:	
₩ =	·		
S35 Filing Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □	□\$52.50 Filing Fee	
Certificate of Status	(Additional copy is	Certificate of Status Certified Copy	
	enclosed)	(Additional Copy is	
	enerosco _i	Enclosed)	
Mailing Address	Stroet	Address	
Amendment Section		ment Section	
Division of Corporations	Division of Corporations		

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

	Articles of Ame	ndment			
	to Articles of Incor	poration			
TII I glesia Val	of lede currently filed y	CedRo	N INC	•	
N 18 0000	3000	5%			
(Document	t Number of Corp	poration (if known)			
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Flo	orida Not For Prof.	it Corporation adopts th	ie follo	wing
A. If amending name, enter the new name of the co 3 RA Iglesia Pentecost		le de (ledron Im	C. The	new
name must be distinguishable and contain the word "co"Company" or "Co," muy not be used in the name.	orporation" or "	incorporated" or ti	he abbreviation "Corp.	"or "h	nc."
B. <u>Enter new principal office address, if applicables</u> (Principal office address <u>MUST BE A STREET ADD</u>					
	<u> </u>				
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO)</u>	Συ				
D. If amending the registered agent and/or register new registered agent and/or the new registered of		s in Florida, enter	the name of the		
Name of New Registered Agent:		<u> </u>			
No. Business JOS of Many		tFlortda st	reet address)		
<u>New Registered Office Address</u> :					
	(City)		Florida		
New Registered Agent's Signature, if changing Regi		h and accept the of	ligations of the position	<i>t</i> .	
			וארר אררי	18	
	Signature e	f New Registered A	Igent, if changing	JAN 12	FILED
	Page 1 of	4	SELORIDA SELORIDA	PH 4: 36	

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	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
t) Change			
Add Remove			
2) Change			
Add Remove			
3) Change			
Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			

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The date of each amendment(s) ad late this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :	1 – 9 – 18 (no more than 90 days after amendment file date	
Note: If the date inserted in this blo- locument's effective date on the Dep	k does not meet the applicable statutory filing require	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes east fo l.	r the amendment(s)
There are no members or membadopted by the board of directed	ers entitled to vote on the amendment(s). The amendres.	ment(s) was/were
Dated	1-9-18	
Signature	adele L	.07 (6 //
have not bec	nan or vice chairman of the board, president or other on n selected, by an incorporator – if in the hands of a rec ppointed fiduciary by that fiduciary)	
	Adela Lima (Typed or printed name of person signin	ng)
	TREASURE	
	(Title of person signing)	