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C. GOLDEN AUG 1 3 2018

COVER LETTER

- TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _		MACIONAL CI	RISTO SU POI	JER EN ACCION, CORP	
N980 DOCUMENT NUMBER:	000002864				
The enclosed Articles of Amenda	ient and fee are subm	itted for filing.			
Please return all correspondence of	concerning this matter	to the following	:		
MARISOL MIRANDA					
	(Name of Contact	Person)		
		(Firm/ Comp	any)		
1322 SE 40TH ST UNIT B4					
1-10-4		(Address)		
CAPE CORAL, FL 339040					
	(City/ State and Z	ip Code)		
LM.MIRANDA.BUSINESS@G	MAIL.COM				
E-mai	address: (to be used)	or future annual	report notificati	on)	
For further information concerning	g this matter, please c	all;			
MARISOL MIRANDA			239- at	440-1911	
(Nan	ne of Contact Person)) (Daytime Telephone Nu	mber)
Enclosed is a check for the follow	ing amount made pay	able to the Floric	la Department o	f State:	
—	43.75 Filing Fee & E Certificate of Status	343.75 Filing F Certified Copy (Additional copenclosed)	Cert by is Cert (Add	50 Filing Fee ificate of Status ified Copy ditional Copy is closed)	
Mailing Addre			Street Address		
Amendment Se			Amendment Sec		

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

MINISTERIO INTERNACIONAL CRISTO SU PODER EN ACCION, CORP

2018 AUG -6 AM 9: 47

 $(\underline{Name\ of\ Corporation\ as\ currently\ filed\ with\ the\ Florida\ \underline{Dept,\ of\ State}})$

N98000002864

SECRETARY OF STATE TALLAHASSEE, FL

(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:

me must be distinguishable and contain the word company" or "Co." may not be used in the name	<u>e</u> .	·
Enter new principal office address, if applica	<u>ble:</u>	UNIT 219 CAPE CORAL, FL 3390
rincipal office address <u>MUST BE A STREET A</u>	DDRESS)	
Enter new mailing address, if applicable:	1322 SE ANTH ST II	NIT B4 CAPE CORAL, FL 33904
AA III II AA AA III BE A BARRA CEESTA	BOX)	THE BA CALE CONAL, LE 30004
(Mailing address MAY BE A POST OFFICE)		
(Mailing address <u>MAY BE A POST OFFICE</u> .		
		ntor the name of the
If amending the registered agent and/or registered agent and/or the new register	stered office address in Florida, e	nter the name of the
If amending the registered agent and/or registered agent and/or the new register	stered office address in Florida, e	nter the name of the
If amending the registered agent and/or regis	stered office address in Florida, e ed office address:	nter the name of the
If amending the registered agent and/or registered agent and/or the new register	stered office address in Florida, e red office address: MARISOL MIRANDA 1322 SE 40TH ST UNIT B4	nter the name of the
If amending the registered agent and/or registerew registered agent and/or the new registered Agent: Name of New Registered Agent:	stered office address in Florida, e red office address: MARISOL MIRANDA 1322 SE 40TH ST UNIT B4	rida street address) 33904
If amending the registered agent and/or registerew registered agent and/or the new registered Agent: Name of New Registered Agent:	stered office address in Florida, e red office address: MARISOL MIRANDA 1322 SE 40TH ST UNIT B4	ida street address)

Page 1 of 4

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			1
Remove			
2) Change		_	
Add			
Remove			
3) Change	_		
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Characa			
6) Change			
Add			
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Re specific)
(unach duannmut sneets, if necessary).	(be specific)
	
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. AUGUST/01/2018	
The date of each amendment(s) adoption:	, if other than the
date this document was signed. AUGUST/01/2018 Effective date if applicable:	
(no more than 90 days after amendment file dat	e)
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of votes east fo was/were sufficient for approval.	r the amendment(s)
There are no members or members entitled to vote on the amendment(s). The amendment adopted by the board of directors.	ment(s) was/were
Dated Signature	
(By the chairman or vice chairman of the board, president or other chave not been selected, by an incorporator – if in the hands of a resother court appointed fiduciary by that fiduciary)	
LUCIANO MIRANDA	
(Typed or printed name of person signi-	ng)
PRESIDENT/PRINCIPAL DIRECTOR.	
(Title of person signing)	