## N21000011077

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:			
N21000011077			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are s	submitted for filing.		
Please return all correspondence concerning this m	natter to the following:		
CARLOS SALAMANCA			
	(Name of Contact Pe	erson)	
CRUZCONNECTION			
	(Firm/ Company	<i>(</i> )	
2003 DEL PRADO BLVD UNIT L			
	(Address)	<u>.</u>	
CAPECORAL, FLORIDA 33990			
	(City/ State and Zip	Code)	
csalamanca1@icloud.com			
E-mail address: (to be	used for future annual rep	port notification	on)
For further information concerning this matter, ple	ease call:		
Carlos Salamanca	41	239	306 0696
(Name of Contact Per			(Daytime Telephone Number)
Enclosed is a check for the following amount mad	le payable to the Florida	Department of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of Stat	& □\$43.75 Filing Fee us Certified Copy (Additional copy i enclosed)	Certi is Certi (Add	60 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section	<u>St</u> At	reet Address nendment Sec	tion _

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

FILED

CRUZ CONNECTION CORP

2021 OCT -5 AH 12: 53

(Name of Corporation as currently filed with the Florida Dept.	of State) SECRETARY OF STATE TALLAHASSEE, FLORI
N21000011077	MALLAHASSEL, FLOG
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this amendment(s) to its Articles of Incorporation:	s Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
CRISTO CONNECTION MINISTRIES, CORP	The new
name must be distinguishable and contain the word "corporation" "Company" or "Co." may not be used in the name.	or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
- <del></del> -	
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 ad- new registered agent and/or the new registered office address	
	<u></u>
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
Ten Registered Office Hudress.	
(C	ity) (Zip Code)
·	
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar	
	and the second s

Signature of New Registered Agent, if changing

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           Y         Mike J           SV         Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change Add	<u>CFO</u>	ANA GLENDY MEDRANO	2003 del PRADO BLVD UNIT L CAPE CORAL, FL 33990
Remove			
2) Change Add	SEC_	GLORIA SALAMANCA	3035 NW 3RD PL CAPECORAL, FL 33993
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add	<del></del>		
Remove			
6) Change Add		· <del></del>	
Remove			
E. If amending or addi (attach additional she	ng additional Artests, if necessary).	ticles, enter change(s) here: (Be specific)	
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The date of each amendmen	((s) adoption:		<u> </u>		, if other than the
date this document was signed					
Effective date <u>if applicable:</u>	09/30/2021				
<del></del>	(no more th	an 90 days after ame	endment file date)		<del></del>
Makan Makandara ta a da					
Note: If the date inserted in the document's effective date on t	us block does not meet the Department of State	ine applicable statuto s records.	ory filing requireme	nts, this date will n	ot be listed as the

■ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

are no members or members entitled to vote on the amendment(s). The amendment(s) was/were d by the board of directors.
09/21/2021 Dated
Signature Signature
(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, or other court appointed fiduciary by that fiduciary)
CARLOS SALAMANCA
(Typed or printed name of person signing)