| - | | ARCA DE JESU | | ecretary of State 9476987183CC |
|---|---|---------------------------|-------------------------------------|-----------------------------------|
| | ling Address: | | | |
| 231 SOUTH LAKE WOR | D STREET TH, FL 33460 US | | | |
| FEI Number: APPLIED FOR Certificate of 3 | | | | atus Desired: No |
| Name and A | Address of Current Registered Agent: | | | |
| GARCIA RAMI 231 SOUTH D LAKE WORTH, | STREET | | | |
| The above name | d entity submits this statement for the purpose of changing its r | egistered office or regis | tered agent, or both, in th | ne State of Florida. |
| SIGNATURE: ANTONIO GARCIA RAMIREZ | | | | 03/07/2022 |
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Dire | ctor Detail : | | | |
| Title | Р | Title | т | |
| Name | GARCIA RAMIREZ, ANTONIO PASTOR | Name | TOMAS ANDRES, L 231 SOUTH D STRI | |
| Address | 231 SOUTH D STREET | | | |
| City-State-Zip: | LAKE WORTH FL 33460 | City-State-Zip: | LAKE WORTH FL | 33400 |
| | | | | |

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000010107

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTONIO GARCIA RAMIREZ

PASTOR

FILED Mar 07, 2022

Electronic Signature of Signing Officer/Director Detail