# 729/66

(Řé	equestor's Name)	
(Ac	ddress)	<u> </u>
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE
SECRETARY OF FLORIDA

RODOTS MAR 2 21 2011

### **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	Vida Abundante	<u></u>
DOCUMENT NUMBER: 72916	6	
The enclosed Articles of Amendment and fee are subn	nitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
- Raquel M (Name of C	Contact Person)	<del></del>
(Firm/	Company)	
6115 Winega	ddress)	
Crlando, Fl (City/State		· · · · · · · · · · · · · · · · · · ·
E-mail address: (to be used)  For further information concerning this matter, please	·	n)
Raquel Wartinez (Name of Contact Person)		'86/ Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida Department of	State:
□\$35 Filing Fee & Certificate of Status	(Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	cle



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 9, 2010

RAQUEL MARTINEZ 6115 WINEGARD RD ORLANDO, FL 32809

SUBJECT: BETHANY ASSEMBLY OF GOD CHURCH, INC.

Ref. Number: 729166

We have received your document for BETHANY ASSEMBLY OF GOD CHURCH, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

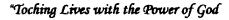
The document number of the name conflict is N96000004870 - IGLESIA VIDA ABUNDANTE INC. Please indicate the exact name of your corporation above in the space provided on your form...

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 010A00005791





Rev. Raquel Martinez Pastor 6115 Winegard Road Orlando, Florida 32809

Ph. 407-855-7505

Fax. 407-855-9280

March 5, 2010

To: Florida Department of State Division of Corporations

On Mach 3. 2010 our church held a meeting with the members of our congregation, and we came to an agreement with the majority of the members that were present, to change the name of our church to: "Iglesia Vida Abundante en Crsito."

No other change was made on the Articles of incorporation or the officers nor the registered agent.

Please make the necessary changes on our incorporation file; thank you for your assistance.

Raquel Martinez

E-mail: iglesiabetaniaad@bellsouth.net

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: BETHANY AS	SEMBLY OF	GOD	
DOCUMENT NUM	BER: 729166			
The enclosed Articles	s of Amendment and fee are sub	omitted for filing.		
Please return all corre	espondence concerning this mat	ter to the following	:	
		L MARTINEZ		<u>-</u>
	(Name of	Contact Person)		
•	BETHANY A	SSEMBLY OF G	SOD	
	(Firm	л/ Сотралу)		
	6115 W	NEGARD RD		
<del></del>	(1	Address)		- <del></del>
	ORLANDO,	, FLORIDA 3280	)9	
	(City/ Sta	te and Zip Code)		
	iglesiabetani E-mail address: (to be use	aad@bellsouth.i		on)
For further information	on concerning this matter, please	e call:		
RAQUEL MARTI	NEZ	at ( 407	_ <sub>)</sub> _733-2444	Telephone Number)
(Name	of Contact Person)	(Area C	Code & Daytime	Telephone Number)
Enclosed is a check f	or the following amount made p	ayable to the Florid	la Department c	of State:
\$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filin Certified Copy (Additional copenclosed)	py is	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Division Clifton 2661 Ex	Address ment Section n of Corporations Building xecutive Center C ssee, FL 32301	

#### Articles of Amendment to Articles of Incorporation of

TOMAR PALED
FERRISE PAY 4:05

### BETHANY ASSEMBLY OF GOD CHURCH, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

#### 729166

(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:

A.	If amending	name, ente	r the new	name of the	corporation:
A.	ti amenume	manic, chie	t rite item	Haine of the	CUI DUI AUDII.

ne new name must be distinguishable and contain the word abreviation "Corp." or "Inc." <u>"Company" or "Co," may no</u>		
oreviation corp. or me. company or co. may no	t be asea in the nume	•
Enter new principal office address, if applicable:		
rincipal office address <u>MUST BE A STREET ADDRESS</u> )		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(maning dualess MAT BE ATOST OFFICE BOX)		
	·	
		enter the name of t
If amending the registered agent and/or registered office new registered agent and/or the new registered office ad		enter the name of t
new registered agent and/or the new registered office ad		enter the name of t
If amending the registered agent and/or registered office new registered agent and/or the new registered office ad Name of New Registered Agent:		enter the name of t
new registered agent and/or the new registered office ad  Name of New Registered Agent:	dress:	enter the name of t
new registered agent and/or the new registered office ad  Name of New Registered Agent:		enter the name of t
new registered agent and/or the new registered office ad  Name of New Registered Agent:	dress:	enter the name of t
new registered agent and/or the new registered office ad  Name of New Registered Agent:	dress: ida street address)	, Florida
new registered agent and/or the new registered office ad  Name of New Registered Agent:	dress:  ida street address)  (City)	

Page 1 of 3

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
	<del></del>		
E. If amen	nding or adding additional Anadditional Anadditional sheets, if necessary	articles, enter change(s) here:  ). (Be specific)	
			·
<del>- 12 - 12 - 11 - 1</del>			
•			
····			

The date of each amendment(s)	adoption: 3-3-2010
( )	(date of adoption is required)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a was/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s) al.
There are no members or mem adopted by the board of directors	nbers entitled to vote on the amendment(s). The amendment(s) was/were ors.
Dated 03-03-2	010
Signature	aguil Marting
(By the	chairman or vice chairman of the board, president or other officer-if directors of been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)
	RAQUEL MARTINEZ
<del>-</del>	(Typed or printed name of person signing)
_	PRESIDENT
	(Title of person signing)

Page 3 of 3