# 755951

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Cr	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	isiness Entity Nai	пе)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	, , , , , , , , , , , , , , , , , , ,	
	Office Use On	lv



900192263999

01/24/11--01031--009 \*\*43.75

2011 FEB 18 P 1: 55

Mewis 2-18-11

700789, 00563,04135,00cm

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: LA FAMILIA C	CRISTIANA, INC	18-1
DOCUMENT NUM	BER: 755951		
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
		O A CALVO	
	(Name of	Contact Person)	
	LA FAMILIA	CRISTIANA, INC	
	(Firm	n/ Company)	
	980 \$	SW 82 AVE	
	(/	Address)	
	MIAM	II, FL 33144	
	(City/ Sta	te and Zip Code)	
		SFERACCT.COM	
	E-mail address: (to be use	d for future annual report not	ification)
For further information	n concerning this matter, please	e call:	
JULIO A CALVO		at ( 786 ) 525-0	9591 ytime Telephone Number)
(Name	of Contact Person)	(Area Code & Da	ytime Telephone Number)
Enclosed is a check for	or the following amount made p	ayable to the Florida Departn	nent of State:
□ \$35 Filing Fee	Certificate of Status	Certified Copy (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 Corpor Clifton Building 2661 Executive Corpor Tallahassee, FL 32	rations enter Circle



January 28, 2011

Julio A. Calvo La Familia Cristiana, Inc. 980 SW 82 Ave Miami, FL 33144

SUBJECT: LA FAMILIA CRISTIANA, INC.

Ref. Number: 755951

We have received your document for LA FAMILIA CRISTIANA, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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) 245-6907.

Annette Ramsey Regulatory Specialist II

Letter Number: 111A00002485

RECEIVED

THEB 18 AM 9: 49

SECRETARY OF STATE
TALLAHASSEE, PLORIDA

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

TO THE TO SE

#### LA FAMILIA CRISTIANA, INC.

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

#### 755951

(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 a	mending	name	enter	the	new	name	ωf	the	carne	ratio	٠.
А.	11 2	mename	name.	enter	ше	HEW	name	O1	ше	CULUL	บลมบ	

MINISTERIO LA	FAMILIA CRISTIANA, INC	
The new name must be distinguishable and cabbreviation "Corp." or "Inc." <mark>"Company" o</mark>		
B. Enter new principal office address, if app		
(Principal office address <u>MUST BE A STREE</u>	<u>—————————————————————————————————————</u>	
C. Enter new mailing address, if applicable	<u>:</u>	
(Mailing address MAY BE A POST OFF)		
D. If amending the registered agent and/or		enter the name of the
new registered agent and/or the new regi	istered office address:	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
		, Florida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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>	<i>,</i> .	Address_	Type of Action
	<u> </u>			☐ Add ☐ Remove
••••••••••••••••••••••••••••••••••••••				
	<u> </u>			
E. If amend (attach ad	ling or adding additio dditional sheets, if nece	nal Articles, ento ssary). (Be spe	er change(s) here: cific)	
				·
<u> </u>				
				-

The date of each amendment(s) adoption: _	01-20-2011
	(date of adoption is required)
Effective date <u>if applicable</u> :	• • • • • • • • • • • • • • • • • • • •
(no m	ore than 90 days after amendment file date)
Adoption of Amendment(s)	CHECK ONE)
The amendment(s) was/were adopted by the was/were sufficient for approval.	ne members and the number of votes cast for the amendment(s)
There are no members or members entitle adopted by the board of directors.	d to vote on the amendment(s). The amendment(s) was/were
have not been selection	r vice chairman of the board, president or other officer-if directors cted, by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)
(T	JULIO A CALVO yped or printed name of person signing)
	PRESIDENT
	(Title of person signing)