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A. Butler 9115121

COVER LETTER

TO: Amendment Section Division of Corporations

First	Church of God of Chosen	One of Miami, I	nc.	
N010000	00173	···	•	
DOCUMENT NUMBER:				
The enclosed Articles of Amendment a	and fee are submitted for filing.			
Please return all correspondence conce	rning this matter to the followi	ng:		
Rytha Filus				
	(Name of Conta	ict Person)	· · · · · · · · · · · · · · · · ·	
	(Firm/ Con	ipany)		
1400 NE 117th street				
	(Addre	is)		
Miami, FL 33161				
	(City/ State and	Zip Code)		
Rythafilus@gmail.com				
E-mail addr	ess: (to be used for future annu	al report notification	on)	
For further information concerning this	matter, please call:			
Rytha Filus		786 at	537-7532	
(Name of C	Contact Person)	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the following a	mount made payable to the Flo	rida Department o	f State:	
	Filing Fee & \$\square\$\$43.75 Filing certified Cop (Additional cenclosed)	y Certi opy is Certi (Add	50 Filing Fee ficate of Status fied Copy litional Copy is losed)	

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

Street Address

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

First Church of God of Chosen One of Miami, Inc.		2021 SEP - 1 PM 6: 06
Name of Corporation as currently filed with the Florida	Dept. of State)	
N0100000173		? ST\TE
(Document Num	ber of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	ntes, this <i>Florida Not F</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:	
N/A		The new
name must be distinguishable and contain the word "corpor	ation" or "incorporate	
"Company" or "Co." may not be used in the name.		
B. Enter new principal office address, if applicable:	N/A	-
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>S</u>)	
		*
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
(maining namess MAT BE A FOST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or registered of	fice address in Florid	s, enter the name of the
new registered agent and/or the new registered office		
Name of New Registered Agent: N/A		
		Florida street address)
New Registered Office Address:		
		, Florida
	(C) . 1	The Codel
_ 	(City)	(Zip Code)

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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>s</u>	Constant Louis	130 NE 164th Street. Miami, FL 33162
x_ Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			4
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		onal Articles, enter change(s) here: ssary). (Be specific)	
N/A			

N/A		
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	09/24/2021	
The date of each amendment(s) adoption date this document was signed	on: (18/24/2021)	_, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block do document's effective date on the Department.	pes not meet the applicable statutory filing requirements, this date will not be nent of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte was/were sufficient for approval	ed by the members and the number of votes cast for the amendment(s)	

Dated	08/24/2021
Signature	MMM
	(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)
	Rytha Filus
	(Typed or printed name of person signing)

(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were