# NDZ00003370

(Re	equestor's Name)	
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(Ci	ty/State/Zip/Phon	e #)
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SECRETARY STATE, FACUAHASSIE, FLORIDA

Amund (12/10)

#### **COVER LETTER**

TO:	Amendment Section	•
	Division of Corporations	

Tallahassee, FL 32314

NAME OF CORPO	RATION: Centro	Cristiano Elin	Inc.
DOCUMENT NUMI	BER: <u>NOZ0000</u>	003370	
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	
Please return all corre	spondence concerning this mat	tter to the following:	
	Round L	eler	
	(Name of	f Contact Person)	
	Ce Tho Cnitin	NO Elin Inc	
	4461 S.W. Z9	• • •	
	mester & FLO. (City/Sta		
Re	E-mail address: (to be use	majl. Com ed for future annual report notificati	on)
For further informatio	n concerning this matter, pleas	e call:	
Round U	de le z of Contact Person)	at (786 ) <u>346-5</u> (Area Code & Daytime	774 Telephone Number)
Enclosed is a check fo		payable to the Florida Department o	
□\$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend Division	ng Address dment Section on of Corporations ox 6327	Street Address Amendment Section Division of Corporations Clifton Building	ŕ

2661 Executive Center Circle Tallahassee, FL 32301



RECEIVE 10 DEC.-3 AM 5

#### FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE Division of Corporations TALLAW SSEE. FLO

November 16, 2010

RONALD VELEZ CENTRO CRISTIANO ELIM, INC. 14461 S.W. 295 ST. HOMESTEAD, FL 33033

SUBJECT: CENTRO CRISTIANO ELIM, INC.

Ref. Number: N02000003370

We have received your document for CENTRO CRISTIANO ELIM, 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):

You failed to make the correction(s) requested in our previous letter.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 110A00026893



November 4, 2010

RONALD VELEZ CENTRO CRISTIANO ELIM, INC. 14461 S.W. 295 ST. HOMESTEAD, FL 33033

SUBJECT: CENTRO CRISTIANO ELIM, INC.

Ref. Number: N02000003370

We have received your document for CENTRO CRISTIANO ELIM, 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 document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 410A00025956

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

Centho Cai	Frowo Klim, Inc.	<u>te)</u> <b>16</b> 055
(Name of Corporation as c	urrently filed with the Florida Dept. of Sta	te)
<u> </u>	23370	; ;
(Document	Number of Corporation (if known)	
Pursuant to the provisions of section 617.10 the following amendment(s) to its Articles of	006, Florida Statutes, this <i>Florida Not For Proof</i> Incorporation:	ofit Corporation adopts
A. If amending name, enter the new nam	ne of the corporation:	
The new name must be distinguishable an abbreviation "Corp." or "Inc." "Compan	nd contain the word "corporation" or "inco y" or "Co." may not be used in the name.	rporated" or the
B. Enter new principal office address, if		
(Principal office address <u>MUST BE A STF</u>	REET ADDRESS )	
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
(municipal municipal management of the municipal municip	THEE BOX	
•		<del> </del>
D. If amending the registered agent and/	or registered office address in Florida, ent	er the name of the
new registered agent and/or the new i		or the hame or the
Name of New Registered Agent:		
rame of their Register en 11gem.		_
New Registered Office Address:	(Florida street address)	-
		. Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if cha I hereby accept the appointment as regist position.		t the obligations of the
		·
	Signature of New Registered Agent, if char	nging

## 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)

**Title** Type of Action <u>Name</u> Address FD Formi Vego 3012 45. W. 159 CT Add No me TRANS 1 38023 1 Remove 30124 5.W 159 CT. Add Abmes Tend fl. 33033 Remove \_\_ 🔲 Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s)	adoption: 18-5/-10
•	(date of adoption is required)
Effective date if applicable:	
	(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	ors.
Dated 1/-2	
(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)
<u> </u>	Rowald Veloz  (Typed or printed name of person signing)
	President  (Title of person signing)