Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000248556 3)))



H210002485563A9C0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

ELLARASSEE, FLORIDA

COR AMND/RESTATE/CORRECT OR O/D RESIGN MINISTERIO EVANGELICO RECOBRANDO LO PERDIDO, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

'JUN 2 5 2021

S. PRATHER

Electronic Filing Menu

Corporate Filing Menu

Help

Article	es of Amendment	74. 2
	to	F. 2
Articles	s of Incorporation	温温
MINISTERIO EVANGELIC	O RECOBRAND	Jan 60 881
(Name of Corporation as currently filed with the Flo	rida Dent. of State)	10 EO TO M
PERDIDO, INC. NO	2000003923	E 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
(Document Number of Co	•	10 N
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Curpora	tion adopts the following
A. If amending name, enter the new name of the corporation	0.00	
The corporate	<u>on.</u>	
name must be distinguishable and		The new
name must be distinguishable and contain the word "corporate "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbrevi	ation "Corp." or "Inc."
	2010 11 17 2 1	11
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	6919 NW 82 AV)	Wianit 1 33 166
		 _
	<u> </u>	t
C. Enter new mailing address, if applicable:	-	MIAMI
(Mailing address MAY BE A POST OFFICE BOX)	6919 NW 82 AVE	F/33166
		=======================================
D. If amending the resistance of a second se		_
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	<u>enter the name of the same of</u>	of the
Name of New Registered Agent:		
6919NV	U:82AV	
	Florida street address)	
New Registered Office Address:	,	
<u></u>	M/ Florida	33166
(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered A	Loent.	• •
I hereby accept the appointment as registered agent. I am fam	iliar with and accept the obligations of	the position.
1/2	en S	•
Significant of Many R	entered Tage if changing	

Page 1 of 4

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>V</u> <u>Mil</u>	un Doe ke Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	S	ANDRES JARAM	11/10
Add Remove			
2) Change	5	ERIK DIAZ	6919NW 82 AU 33166 MIAMI FL
Remove 3) Change			
Add			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change			
Add			

. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	<u> </u>		
				
		·		
				
<u>. </u>	·		·	
	-			
				
				
<u> </u>				
				
	_			-
	-			
	-		· -	
			-	
				
				

date this document was signed.		, if other	than th
Effective date if applicable:			
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s)		
There are no members or memb adopted by the board of directo	ers entitled to vote on the amendment(s). The amendment(s) was/were		
Dated	6-24-21		
Signature /			
(By the chair:	nan or ad chairman of the board, president or other officer-if directors		
other court a	selected, by an incorporator – if in the hands of a receiver, trustee, or oppointed fiduciary by that fiduciary)	577	21
	-		2 KOL 1203
_Kan	IN SIERRA	22.5 22.5	Ē
(Typed or printed name of person signing)	SS	2
	PRESIDEN	EE,	*
	(Title of person signing)		7
		57-1	ထ္