## 02000007962

(Requestor's Name)	
(Address)	800186748228
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	10/18/1001032006 **4:
(Document Number)	
Certified Copies Certificates of Status	<b>a</b>
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10/20/10

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## COVER LETTER

TO: Amendment Section

• Division of Corporations		
NAME OF CORPORATION: CHUZEH O	F GOD JOHN	3:16,100
DOCUMENT NUMBER: NO 200	0007962	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
LUIS MIRA	MBEAU X Contact Person)	
CHURCH OF 600	10th 3:16,	INC.
3853 NORTH	CAKE OZLAN	90
ORlango, F	Z 37808 e and Zip Code)	
CHURCH JOHN E-mail address: (to be used	316 @ HOTMAIL  I for future annual report notification	Com
For further information concerning this matter, please	call:	
UIS MIRAM BEAUX (Name of Contact Person)	at ( <u>407</u> ) <u>429 -</u> (Area Code & Daytime	5079 Telenhone Number)
Enclosed is a check for the following amount made pa	•	•
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	\$2.75 Filing Fee & 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	Street Address Amendment Section Division of Corporations Clifton Building	is circlosed)

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation

٥f

(Name of Corporation as curren	ntly filed with the Florida Dept. of S	State)	
N020000079	102	· .	
(Document Numb	ber of Corporation (if known)	<del> </del>	
Pursuant to the provisions of section 617,1006. If the following amendment(s) to its Articles of Inc		· Profit Corporation ado	pts
A. If amending name, enter the new name of			
IGLESIA CRISTIAN. The new name must be distinguishable and conabbreviation "Corp." or "Inc." "Company" or	ntain the word "corporation" or "is "Co," may not be used in the name.	TNC ncorporated" or the	
B. Enter new principal office address, if appli		<u> </u>	
(Principal office address <u>MUST BE A STREET</u>	<u>(ADDRESS</u> )		
	•	100 CT	eretti ja
•			Janes.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	E BOX)		TT
		-16	
		et fair	
D. If amending the registered agent and/or re		enter the name of the	
new registered agent and/or the new registered	tered office address:		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street address)		
-		Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changin I hereby accept the appointment as registered position.		cept the obligations of	the
		•	

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) Type of Action Title <u>Name</u> Address ☐ Add \_\_\_\_\_ □ Remove ☐ Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date o	f each amendment(s) adoption:
. `	(date of adoption is required)  ate if applicable:  (date of adoption is required)
•	(no more than 90 days after amendment file date)
Adoption c	of Amendment(s) (CHECK ONE)
	endment(s) was/were adopted by the members and the number of votes cast for the amendment(s) re sufficient for approval.
	are no members or members entitled to vote on the amendment(s). The amendment(s) was/were by the board of directors.
	Dated 10/11/24/0
	Signature
	(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator — if in the hands of a receiver, trustee, cother court appointed fiduciary by that fiduciary)
	BEZALEEL DIAZ (Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)