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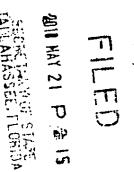
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(Add	ress)	
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COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corporat	ions				
NAME OF CORPORAT	IGLESIA DE DIOS	S LINAJE ESCOG	IDO IN TAMP	PA, INC.	•
DOCUMENT NUMBER	N04000003629			-	
The enclosed Articles of A	mendment and fee are sub				
Please return all correspon	dence concerning this matte	er to the following:			
SAMUEL ROBLES					
		(Name of Contact I	Person)		
IGLESIA DE DIOS LINA	JE ESCOGIDO IN TAMP	PA, INC.			
		(Firm/ Compar	ıy)		
7216 E CHELSEA ST					
		(Address)	<u> </u>		
TAMPA FL 33610					
	((City/ State and Zip	Code)		
samuelrobles1960@gma	iil.com				
	-mail address: (to be used	for future annual re-	port notificatio	n)	
For further information con-					
SAMUEL ROBLES		at	813	598-4167	
	(Name of Contact Person)	at	(Area Code)	(Daytime Telephone N	umber)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida I	Department of		
□ \$35 Filing Fee	☐\$43.75 Filing Fee & ☐ Certificate of Status	J\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi s Certifi	O Filing Fee icate of Status led Copy lional Copy is sed)	

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

		
(Name of Corporation as curre	ently filed with the Florida Dept	of State)
IGLESI DE DIOS LINAJE ESCOGIDO IN TAMPA, INC).	
(Document Num	ber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this <i>Florida Not For Profit C</i>	Corporation adopts the following
A. If amending name, enter the new name of the corpora	tion:	
IGLESIA DE DIOS FUENTE DE VIDA, INC.		
name must be distinguishable and contain the word "corport "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the a	The new abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	11511 CORWIN ST	
(Principal office address <u>MUST BE A STREET ADDRESS</u>) GIBSONTON FL 33534	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7216 E CHELSEA ST	
January State Stat	TAMPA FL 33610	
D. If amending the registered agent and/or registered offi	ce address in Florida, enter the	name of the
new registered agent and/or the new registered office a	address:	
Name of New Registered Agent:		
New Registered Office Address:	(Florida str e et a	ddress)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:	
hereby accept the appointment as registered agent. I am fai	miliar with and accept the obligat	ions of the position.
	gnature of New Registered Agent,	if changing
		if changing D
	_	
· ·	Page 1 of 4	元 元

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)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		Page 2 of 4	

cles, enter change(s) here: (Be specific)

The date of each amendment(s) ado date this document was signed.	ption: 5-13-2018	_, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depa	c does not meet the applicable statutory filing requirements, this date will not burtment of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop was/were sufficient for approval.	oted by the members and the number of votes cast for the amendment(s)	
There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/were	
Dated	13-208	
Signature	und hobbes de/es	
mave not been s	on or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	•
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing) Presidential	
	(Title of person signing)	