N0400005487

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SECRETARY OF STATE
JALLAHASSEE: FLORI

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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 6, 2015

Maria Patricia Gomez Wake-Up Counseling Services Inc. 8245 NW 36 Street, Unit 3 Doral, FL 33166

SUBJECT: EMPOWERMENT CHRISTIAN COMMUNITY CORPORATION

Ref. Number: N04000005487

We have received your document for EMPOWERMENT CHRISTIAN COMMUNITY CORPORATION 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is N13000009450.

Please sign the amendment form as the president in the space provided at the bottom of page 4.

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) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 515A00000164

COVER LETTER

TO: Amendment Section Division of Corporations

F	-4 Ob-i-4: O	
NAME OF CORPORATION:	nt Christian Com	munity Corporation
DOCUMENT NUMBER: NO400005	5487	
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning this matt	er to the following:	
Maria Patricia Gomez		
	(Name of Contact Person	n)
Wake-Up Counseling Se	ervices, Inc.	
	(Firm/ Company)	
8245 NW 36 Street, Unit	t 3	
	(Address)	
Doral, Florida 33166		
	(City/ State and Zip Cod	e)
sicologapatriciago E-mail address: (to be used		
For further information concerning this matter, please	call:	
Maria Patricia Gomez		326-6308
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	rtment of State:
\$35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Division Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment Articles of Incorporation

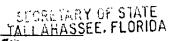
FILED.

Empowerment Christian Community Corporation

2015 JAN 26 PM 3: 58

(Name of Corporation as currently filed with the Florida Dept. of State)

N04000005487



(Document Number of Corporation (if known)

Pursuant to the provisions of section 617 1006 Florida Statutes this Florida Not For Pr

Vake-Up and Arise me must be distinguishable and con tompany" or "Co." may not be use	tain the word "corp	oration" or "incorporated" or the abbreviation "Corp	The p." or ".
Enter new principal office address, if applicable:		8245 NW 36 Street Unit 3	
rincipal office address <u>MUST BE</u>		Doral, Florida 33166	
Enter new mailing address, if ag		8245 NW 36 Street Unit	3
<i>- iMailing address MAY KE A PO</i> S	AL UPPULE BUXE		
(Mailing address <u>MAY BE A POS</u>	<u>OI OFFICE BUX</u>)	Doral, Florida 33166	
(Mauing address <u>MAY BE A POS</u>	SI OFFICE BOX)	Doral, Florida 33166	
If amending the registered agent	and/or registered (office address in Florida, enter the name of the	
If amending the registered agent new registered agent and/or the	and/or registered office	office address in Florida, enter the name of the	
	and/or registered of new registered offic nt. Maria Pati	office address in Florida, enter the name of the	
If amending the registered agent new registered agent and/or the Name of New Registered Age	and/or registered of new registered office Maria Patro 8245 N	office address in Florida, enter the name of the see address: ricia Gomez	
If amending the registered agent new registered agent and/or the	and/or registered of new registered office Maria Patro 8245 N	office address in Florida, enter the name of the see address: ricia Gomez N 36 Street Unit 3	

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	PT John I V Mike SV Sally S	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>P</u>	Urias, Ronald	12855 SW 136 Street
Add			Suite 203
XX Remove			Miami, FI 33186
2) Change	<u>T</u>	Magaly Fernandez	15880 SW 301 Terr
Add			Miami, FI 33033
XX Remove			
3) Change	S	Neisylis Pineda	12100 SW 218 Street
Add			Miami, FI 33170
XX Remove			
4) Change	Р	Maria Patricia Gomez	8245 NW 36 Street Unit 3
XX Add			Doral, Florida 33166
Remove			
5) Change	V	Jose Antonio Morante	210 172 St Apto 142
XX Add			Sunny Isles, FI 33160
Remove			
6) Change	<u>T</u>	Ruben Pacheco	5701 NW 112 Ave #107
XX_{Add}			Doral, FI 33178
Remove		Page 2 of 4	-

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Page 2						
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Type of Action (Check One)	Title	Name	Address
7) add	S	Jaime Yanez	20340 SW 1 st Street Pembroke Pines, Fl 33029
8) add	D	Gloria Neira	10730 NW 66 Street #401 Doral. Fl 33178
		·	

If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)			
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	date of each amendment	• • • • • • • • • • • • • • • • • • • •	, if other than the
	ate this document was signed. O1/20/2015 O1/20/2015		
in apparente.		(no more than 90 days after amendment file date)	
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes cast for the amendment(s) oproval.	
	There are no members or adopted by the board of	members entitled to vote on the amendment(s). The amendment(s) was/were directors.	
	Dated 01/	/20/ <u>2</u> 015	
	Signature	Da a Pasis	
	have r	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	Maria	Patricia Gomez	
		(Typed or printed name of person signing)	
	Presid	lent	
		(Title of nerson signing)	