N040000365

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|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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TO: Amendment Section Division of Corporations

| * | | | | |
|--|--|--|--|--|
| NAME OF CORPORATION: IGLESIA C | CRISTO REY | DE REYES, INC. | | |
| DOCUMENT-NUMBER: NO400007 | | | | |
| The enclosed Articles of Amendment and fee are subr | * - # | | | |
| Please return all correspondence concerning this matter | er to the following: | | | |
| MARLON R. MARTINEZ | , - | | | |
| | (Name of Contact Person | 1) | | |
| IGLESIA CRISTO REY | DE REYES, | INC. | | |
| | (Firm/ Company) | | | |
| 1102 N FLAGLER AVE. | | | | |
| | (Address) | | | |
| HOMESTEAD, FL 33030 |) ָ | | | |
| | (City/ State and Zip Cod | e) | | |
| CRISTOREYDEREYES@ATT.NET E-mail address: (to be used for future annual report notification) | | | | |
| E-mail address: (to be used | for future annual report | notification) | | |
| For further information concerning this matter, please | call: | | | |
| MARLON R MARTINEZ | 786 | 564-6207 | | |
| (Name of Contact Person) | (Area Co | ode & Daytime Telephone Number) | | |
| Enclosed is a check for the following amount made pa | yable to the Florida Depa | artment of State: | | |
| \$35 Filing Fee Certificate of Status | S43.75 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 | Amend | Address Iment Section on of Corporations | | |
| P.O. Box 6327 | | Building | | |

Tallahassee, FL 32314

2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

| SECRETARY OF STATE FALLAHASSEE, FLORIDA |
|---|
| 12 32 18 PH 4: 17 |

IGLESIA CRISTO REY DE REYES, INC.

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

N04000007365

| A. If amending name, enter the new nam | e of the corporati | tion: | |
|---|--------------------|--|----------|
| N/A | | | The ne |
| ame must be distinguishable and contain t Company" or "Co." may not be used in the | | ation" or "incorporated" or the abbreviation "Corp." | or "Inc. |
| B. Enter new principal office address, if applicable: | | N/A | |
| Principal office address <u>MUST BE A STR</u> | REET ADDRESS) | | |
| | | | _ |
| | | | _ |
| C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF | | N/A | |
| | | | |
| | | | _ |
| | | | |
| If amending the registered agent and/ new registered agent and/or the new | | ice address in Florida, enter the name of the address: | |
| | N/A | | |
| Name of New Negistered Agent. | | | |
| | | | |
| - | | (Florida street address) | |
| - New Registered Office Address: | | (Florida street address) | |
| | N/A (City) | , Florida | |

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 | <u>Jones</u> | |
|----------------------------------|---------------------------------|--------------|-----------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | DS | TERESA SAFIE | 1102 N FLAGLER |
| Add | | | AVE. |
| X Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) | | | | |
|---|----------|---------------------------------------|-------------|--|
| MS SAFIE RESIGNED AS SECRETARY OF THE BOARD OF DIRECTORS. AS OF SEPTEMBER 14, 2012. | | | | |
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| The | date of each amendment | nt(s) adoption: SEPTEMBER 14, 2012 | | | |
|--|--|--|----------|--|--|
| Effective date if applicable: SEPTEMBER 14, 2012 | | | | | |
| | | (no more than 90 days after amendment file date) | | | |
| Ado | option of Amendment(s) | (CHECK ONE) | | | |
| | The amendment(s) was/w was/were sufficient for ap | were adopted by the members and the number of votes cast for the amendapproval. | dment(s) | | |
| | There are no members or adopted by the board of o | or members entitled to vote on the amendment(s). The amendment(s) was directors. | s/were | | |
| | Dated 9-1 Signature | 14-2012 dentit | | | |
| | (By the | ne chairman or vice chairman of the board, president or other officer-if dinot been selected, by an incorporator – if in the hands of a receiver, trust court appointed fiduciary by that fiduciary) | | | |
| | MARLON R MARTINEZ | | | | |
| | PRESI | (Typed or printed name of person signing) IDENT | | | |
| | | (Title of person signing) | | | |