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2019 CCT -8 MM II: 25

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COVER LETTER

TO: Amendment Section
Division of Corporations

O

Tallahassee, FL 32301

Associac NAME OF CORPORATION:	ao dos Pastores Bras ————————————————————————————————————	ileiros da F	lorida, Ind	C.
DOCUMENT NUMBER:	47	-		
The enclosed Articles of Amendment and 1	ee are submitted for filing	ng.		
Please return all correspondence concerning	g this matter to the follo	wing:		
Ricardo Rodriguez				
	(Name of Co	ontact Perso	n)	
	(Firm/ C	'ompany)		
9970 Ramblewood Drive				
	(Add	iress)	_	
Coral Springs, FL 33071				
	(City/ State a	nd Zip Cod	e)	
rea1520@bellsouth.net				
E-mail address:	(to be used for future an	nual report	notification	n)
For further information concerning this mat	ter, please call:			
Ricardo Rodriguez		95 at	4	425.2775
(Name of Cont	act Person)		rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amou	nt made payable to the F	lorida Depa	irtment of S	State:
■ \$35 Filing Fee □\$43.75 Fili Certificate	ing Fee & S43.75 Fil. of Status Certified C (Additional enclosed)	Сору	Certifi Certifi	O Filing Fee icate of Status ied Copy is iconal Copy is issed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division Clifton	Address Iment Section of Corpo Building executive C	

Articles of Amendment Articles of Incorporation of

		of			
Associacao dos Pastores Brasileiros da Florid	la, Inc.			2019 OCT -8	48 U
(Name of Corporation	as curre	ntly filed with the	Florida Dept. of Stat	<u>e</u>)	<u> </u>
104000008747					
(Docum	nent Num	ber of Corporation (if known)		
ursuant to the provisions of section 617.1006, Flor mendment(s) to its Articles of Incorporation:	rida Statut	tes, this <i>Florida No</i>	t For Profit Corporat	ion adopts the foll	lowing
If amending name, enter the new name of the	corporat	tion:			
ssociacao Dos Pastores Evangelicos Brasile	iros Nos	EUA, Inc.		Tr).	
ime must be distinguishable and contain the word Company" or "Co." may not be used in the name	l "corpora	ntion" or "incorpor	ated" or the abbrevia	tion "Corp." or "	e new Inc."
Enter new principal office address, if applica	ble:	7736 NW 25th 8	Street		
rincipal office address <u>MUST BE A STREET A</u>	<u>DDRESS</u>	Margate, FL 330	063		
			· · · · · ·		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<i>BOX</i>)	7736 NW 25th 5	Street		
		Margate, FL 330	063		
If amending the registered agent and/or regis new registered agent and/or the new registered	tered offi	ce address in Flori	da, enter the name o	f the	
Name of New Registered Agent:		raaress: Rodriguez			
	9970 Ran	nblewood Drive			
	(Florida street address)				
New Registered Office Address:			-		
	Coral Spr		, Flo	33071 orida	
		(City)	(Zip Code)	
w Registered Agent's Signature, if changing Rereby accept the appointment as registered agent	. I am fa	miliar with and acc	(
_	S	ignature of New Reg	gistered Agent, if chai	nging	

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.

(Check One) 1) Change	Example: X Change X Remove X Add		Doe : Jones : Smith	
Change	Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Remove	1) Change		n/a	n/a
2) Change	Add			
2)Change	Remove			
Add	2) Change		n/a	n/a
Change		•		
Add Remove	Remove			
Remove	3) Change		n/a	n/a
1	Add			
4) Change Add	Remove			
Remove	4) Change		n/a 	n/a
5) Change n/a	Add			
Add	Remove			
Add	5) Change		n/a	n/a
Remove				
6) Change n/a				
6) Change			n/a	n/a
				
Add				

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	***		
n/a				
				
				·
		·		
				
		 	•	
-		-		
				
			.	
				•
*				
, <u> </u>				· - -

	October 1st, 2019	
The date of each amendment(s) adoption:		, if other than the
date this document was signed.		
October 1st Effective date <u>if applicable</u> :	i, 2019	
	no more than 90 days after amendment file date)	<u> </u>
Note: If the date inserted in this block does document's effective date on the Departmen	not meet the applicable statutory filing requirements, this date will not it of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted b was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	
There are no members or members entitied adopted by the board of directors.	Itled)to vote on the amendment(s). The amendment(s) was/were	
October 1st 2019 Dated		
Signature / COU	MATACO	
(By the chairman or	vice chairman of the board, president or other officer-if directors	
have hot been selec	ted, by an incorporator – if in the hands of a receiver, trustee, or	
other court appointe	ed fiduciary by that fiduciary)	
President		
	(Typed or printed name of person signing)	
Leidmar Lopes	, Pr.	
	(Title of person signing)	