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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	AMERICAN CATHO	OLIC JUDAIC ORT	HODOX CHU	RCH, INC.
	N04449			
DOCUMENT NUMBER:				
The enclosed Articles of Am	nendment and fee are subm	nitted for filing.		
Please return all corresponde	ence concerning this matter	r to the following:		
ANDRES LEAL				
· · · · ·		(Name of Contact P	erson)	
AMERICAN CATHOLIC	UDAIC ORTHODOX CH	IURCH, INC.		
	•	(Firm/ Company	y)	•
760 E 33 ST				
		(Address)		
HIALEAH, FL 33013				
-	((City/ State and Zip	Code)	
acjoc84@gmail.com				
F	-mail address: (to be used	for future annual rej	port notification	1)
For further information conc	erning this matter, please of	call:		
ANDRES LEAL		31	786	704-7702
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	vable to the Florida	Department of S	State:
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi is Certifi	0 Filing Fee icate of Status ied Copy tional Copy is seed)
Mailing A	<u>address</u>	St	reet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation

18 HAR 29 PM 3: 21

AMERICAN CATHOLIC JUDAIC ORTHODOX CHURCH, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N04449 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: SAME name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. 760 E 33 ST B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) HIALEAH, FL 33013 C. Enter new mailing address, if applicable: 760 E 33 ST (Mailing address MAY BE A POST OFFICE BOX) HIALEAH, FL 33013 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: ANDRES LEAL Name of New Registered Agent: 760 E 33 ST (Florida street address) New Registered Office Address: , Florida ... HIALEAH (Zip Code) (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Ageylt, 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)

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 Do V Mike Jo SV Sally Si	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	PTSD, (&D	ANDRES LEAL	760 E 33 ST
Add			HIALEAH, FL 33013
Remove			··· · · · · · · · · · · · · · · · · ·
2) Change	VP, cro	ISRAY J. EXPOSITO RAMIREZ	4422 NW 105 ST
X Add	 -		MIAMI GARDENS, FL 33055
Remove			
3) Change	CFO, VCD	VICTORIA RUBIO	760 E 33 ST
X Add			HIALEAH, FL 33013
Remove			
4) Change	COO depocition	JOEVANNY RUBIO	760 E 33 ST
X Add			HIALEAH, FL 33013
Remove			
5) Change	EXECU 50	SANDY RUBIO	760 E 33 ST
X Add			HIALEAH, FL 33013
Remove			
6)Change			27
Add			
Remove			

(attach additional sheets, if necessary). (Be specific)
PLEASE CHANGE THE FOLLOWING POSITIONS:
PRESIDENT ANDRES LEAL 760 E 33 ST HIALEAH, FL 33013
VICE PRESIDENT ISRAY J. EXPOSITO RAMIREZ 4422 NW 105 ST MIAMI GARDENS, FL 33055
REMOVE THE FOLLOWING PERSON AND POSITIONS:
VP CARIDAD TELLEZ 1986 W 60TH ST HIALEAH, FL 33012

	02/01/2018	
	ie date of each amendment(s) adoption:	_, if other than th
date	te this document was signed.	
	03/01/2018	
Effe	fective date if applicable:	
	(no more than 90 days after amendment file date)	
	ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not cument's effective date on the Department of State's records,	be listed as the
Ado	loption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	02/01/2018 Dated Signature	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
	ANDRES LEAL	
	(Pyped or printed name of person signing)	
	PRESIDENT Rubes Lead	
	(Title of person signing)	