

N05000002610

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

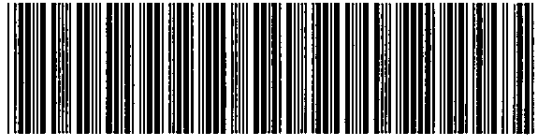
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/29/07--01035--019 **35.00

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2007 NOV 19 AM 11:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

TB

11-20-07

COVER LETTER

TO: Amendment Section
Division of Corporations

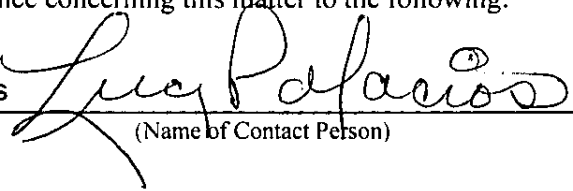
NAME OF CORPORATION: Ministerio Casa De Alabanza en Gracia Inc.

DOCUMENT NUMBER: N05000002610

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lucy Palacios


(Name of Contact Person)

M & L ACCOUNTING

(Firm/ Company)

19554 NW 59 AVENUE

(Address)

Miami Gardens, FL 33015

(City/ State and Zip Code)

For further information concerning this matter, please call:

Lucy Palacios

(Name of Contact Person)

at (305) 623-7093

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 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

Street Address

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 31, 2007

LUCY PALACIOS
M & L ACCOUNTING
19554 NW 59 AVENUE
MIAMI GARDENS, FL 33015

SUBJECT: MINISTERIO CASA DE ALABANZA EN GRACIA, INC.
Ref. Number: N05000002610

We have received your document for MINISTERIO CASA DE ALABANZA EN GRACIA, INC. 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 407A00063698

Articles of Amendment
to
Articles of Incorporation
of

Ministerio Casa De Alabanza en Gracia, Inc.

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

N05000002610

(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:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (**BE SPECIFIC**)

To Change the treasure from Fermin I Castanedas with address 840 82nd St. # 3

Miami Beach, FL 33141

To: Francisca E. Pinto with address 4845 NW 7 Street # 108 Miami FL 33126

(Attach additional pages if necessary)
(continued)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

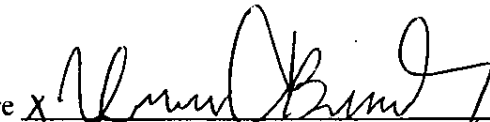
The date of adoption of the amendment(s) was: 10/20/07

Effective date if applicable: 10/20/2007
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

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.)

Yolanda Balvi

(Typed or printed name of person signing)

President/Register Agent

(Title of person signing)

FILING FEE: \$35