N06000006060

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BRAZILIAN BAPTIST COMMUNITY OF HOLLYWOO					
DOCUMENT NU	ивек: <u>N06000006060</u>				
The enclosed Articl	es of Amendment and fee are sub	omitted for filing.			
Please return all cor	respondence concerning this mat	ter to the following	.:		
		OS REZENDE			
	(Name of	Contact Person)			
	CSG - CAPITAL S	SERVICES GRO	OUP INC		
	(Firm	/Company)			
446 W HILLSBORO BLVD					
	(Address)				
	DEERFIELD	BEACH, FL 334	1 41		
	(City/ Sta	te and Zip Code)			
	E-mail address: (to be use	d for future annual	report notificati	on)	
For further informat	ion concerning this matter, please	e call:			
MARCOS REZE	NDF	at (954	, 427-4770		
	e of Contact Person)	ur (Telephone Number)	
	for the following amount made p				
\$35 Filing Fee	☑ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filin Certified Copy (Additional copenclosed)		□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ling Address		Address	is cholosed)	
	Amendment Section Amendment Section				
	Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building				
	Tallahassee, FL 32314 2661 Executive Center Circle		ircle		

Tallahassee, FL 32301

Articles of Amendment to of



BRAZILIAN BAPTIST COMMUNITY OF HOLLYWOOD INC

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

N06000006060

(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:

BRAZILIAN BAPTIST COM	MUNITY OF SOUTH FLORIDA	A INC
The new name must be distinguishable and co abbreviation "Corp." or "Inc." <u>"Company" or</u>		
B. Enter new principal office address, if appl (Principal office address <u>MUST BE A STREE</u>)		· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	(E BOX)	
D. If amending the registered agent and/or re new registered agent and/or the new regist		enter the name of the
Name of New Registered Agent:	<u> </u>	<u> </u>
New Registered Office Address:	(Florida street address)	
-	(City)	, Florida (Zip Code)

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 Agent, 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)

<u>Title</u> <u>Name</u> Address **Type of Action** ☐ Add ☐ Remove ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendmen	t(s) adoption: 03/31/2011
Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☑ The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated	
Signature _	5/bavavja
hav	the chairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	GILBERTO LARANJA
	(Typed or printed name of person signing)
	V.PRESIDENT / DIRECTOR / TREASURER
	(Title of person signing)

Page 3 of 3