NO6000008316

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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. (Document Number)
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08/13/09--01014--017 **43.75

Amend

SECRETARY OF STATE OF CORPORATIONS
ON AUG 13 PM 2: 05

TROBERS AUG 1171 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	PRATION: Movimiento Int	ternacional Pentecostal	Betel Corp
DOCUMENT NUM	IBER: N06000008316		
The enclosed Article	s of Amendment and fee are sub	mitted for filing.	
Please return all corr	espondence concerning this matt	er to the following:	
		o D. Artiga	
	(Name of	Contact Person)	
	PRI	ESIDENT	
***************************************	(Firm	/ Company)	
	1600 L	.South Dixie	
,	(A	Address)	
	WEST PALM	BEACH, FI 33461	
. ,		e and Zip Code)	
		nan1@aol.com for future annual report notifica	ation)
For further informati	on concerning this matter, please	e call:	
Martha Ucanan		at (305) 649 224	9
(Name	e of Contact Person)	(Area Code & Daytin	ne Telephone Number)
Enclosed is a check	for the following amount made p	ayable to the Florida Departmen	t of State:
□ \$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		Street Address Amendment Section	
	sion of Corporations Box 6327	Division of Corporation Clifton Building	ons
Tallahassee, FL 32314		2661 Executive Cente Tallahassee, FL 32301	

Articles of Amendment. to **Articles of Incorporation**

(Zip Code)

	of .	09 AUG 13 PM 2: 06
MOVIMIENTO INTERNACIO	NAL PENTECOS	STAL BETEL COR
(Name of Corporation as curre	ently filed with the Flo	rida Dept. of State)
N066	000008316	
(Document Num	nber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, the following amendment(s) to its Articles of In		orida Not For Profit Corporation adopts
A. If amending name, enter the new name of	f the corporation:	
The new name must be distinguishable and coabbreviation "Corp." or "Inc." "Company" o		
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)		
D. If amending the registered agent and/or r new registered agent and/or the new regis		s in Florida, enter the name of the
Name of New Registered Agent:	Viajeservi USA	
	2905 NV	/ 9 st
New Registered Office Address:	(Florida stre	et address)
	miam	i - 33125

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

(City)

Page 1 of 3

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>	Name	Address	Type of Action
T	OLIVARES, JESUS M	5144 PINE ABBEY DR. WEST PALM BEACH FLORIDA 33415	_ □ Add □ ☑ Remove
<u>T</u>	RESENDIZ, LUIS	600 W BROWARD STREET LANTANA, FL 33462	☑ Add □ Remove
			_
	nding or adding additional Articles, en additional sheets, if necessary). (Be sp		

The date of each amendment(s) adoption: 08/13/09
(date of adoption is required)
Effective date if applicable:
(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(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.
·
Dated 08/10/09
Signature * Ovidio & Fritiga
(By the chairman or vice chairman of the board, president or other officer-if directo
have not been selected, by an incorporator - if in the hands of a receiver, trustee,
other court appointed fiduciary by that fiduciary)
Ovidio Artiga (Typed or printed name of person signing)
(Typed or printed name of person signing)
President
(Title of person signing)

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