# N0700000122

(D	equestor's Name)	
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(C	ity/State/Zip/Phone #	)
PICK-UP		MAIL .
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(B	usiness Entity Name	
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	ocument Number)	
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Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	, ,
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Office Use Only



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Aprend.

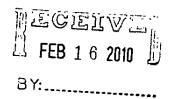
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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

February 11, 2010

HEIDI HOLDAM HG HOLDAM TAX & ACCOUNTING 3830 JOG ROAD LAKE WORTH, FL 33467



SUBJECT: MINISTERIO G12 NUEVA JERUSALEN DE FLORIDA INC

Ref. Number: N0700000122

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 110A00003569

#### COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CO	RPORATION: MINISTERIO G	12 NUEVA JERUSALE	M DE FLORIDAINC.
DOCUMENT	NUMBER: N0700000122		
The enclosed A	rticles of Amendment and fee are subm	itted for filing.	
Please return all	correspondence concerning this matter	to the following:	
_	HEIDI	HOLDAM	
	(Name of C	ontact Person)	
	HG HOLDAM TA	X & ACCOUNTING	
-	(Firm/ C	Company)	
	3830 JOG RD		
•	(Ad	dress)	<del></del>
	LAKE WOR	TH, FL. 33467	
-	(City/ State	and Zip Code)	
		PFDN.COM or future annual report notificati	on)
For further infor	mation concerning this matter, please c	all:	
HEIDI HOLD	AM	at (561) 434-4451	
(1)	Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a ch	eck for the following amount made pay	able to the Florida Department o	f State:
☑ \$35 Filing Fe	e ☐ \$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 C Tallahassee, FL 32301	,

### Articles of Amendment to Articles of Incorporation of

Ministerio G12 Nucle J (Name of Corporation as currently filed with	erusalen de Florida Inc
N 0 700000 122 (Document Number of Corporat	
Pursuant to the provisions of section 617.1006, Florida Statutes the following amendment(s) to its Articles of Incorporation:	, this Florida Not For Profit Corporation adopts
A. If amending name, enter the new name of the corporatio	<u>n:</u>
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may not	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	3101 FOREST HILL BLVD
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	WEST PALM BEACH, FL 3344
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade	
Name of New Registered Agent:	·
New Registered Office Address: (Flori	da street address)
	, Florida
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am 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
BM	TRANCITO HERRERA	2784 REO LN DR APT 1 LAKE WORTH, FL. 33461	☑ Add ☐ Remove
E. If ar	nending or adding additional Articles, en The additional sheets, if necessary). (Be sp	nter change(s) here: pecific)	
		`	
			<del></del>

The date of each amendment(s) adoption:0212110
Effective date if applicable: 2 10 10 (date of adoption is required)
(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 ACAmmajon 2-2-10
(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, of other court appointed fiduciary by that fiduciary)
JOSE A CARRANZA  (Typed or printed name of person signing)
(Title of person signing)

Page 3 of 3