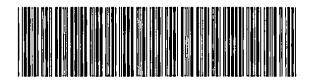
## NO 70000000 746

(Requestor's Name)
(Address)
(Address)
(0) (0) . (1) (0)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100331381561

07/05/19--01807--018 \*+35.00

2019 JUI -5 PH 6: 37

C. GOLDEN JUL 1 6 2019

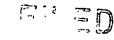
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Iglesia Principe de Pez de Film Coast
DOCUMENT NUMBER: NO 7000000 746
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Israel Santiago (Name of Contact Person)
(Name of Contact Person)
(Firm/ Company)
160 Cypress Point PKwy. Suite DIOS
Palm Coast FL 32/64 (City/ State and Zip Code)
Principe de Pazoc e smail · Can  E-mail address: (to be used for future about positivation)
For further information concerning this matter, please call:
Rosa M. Santiago at 407 - 319 - 4305 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
□\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status (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

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

## Articles of Amendment to Articles of Incorporation of



IGLESIA PRINCIPE DE PAZ DE PALM COAST, INC.

2019 JUL -5 PM 6:37

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
No70000074	(a. 10)
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:
	The new
name must be distinguishable and contain the word "corporat " <u>Company" or "Co." may not be used in the name</u> .	ion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	
Name of New Registered Agent: 150	ael Santiago
New Registered Office Address:	Cypress Birt Pkny Suite Dios (Florida street address)
	City) . Florida 32164 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered	
I hereby accept the appointment as registered agent. I am for	nthar with and accept the obligations of the position.
Si	gnature 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)

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		Doe Jones Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	P	Israel Santingo	2110 Triumfu Cir. Kissimmee DL 34744
Remove 2) Change Add	<u></u>	ENERY BOOKE	7 Bradmore Ln Palm Coast FL 32137
Remove  3) Change  Add	_5_	Rosa W. Santiago	2110 Triunto air Kissimmee FL 34744
Remove  4) Change Add Remove	T	Nadia Rivas	7 20 diac PL Palm Coast FL 32/64
5) Change Add Remove	<u>52</u>	Mario de la Cruzsa	P. O. 50x 353/65 Palm Coast FL 32/35
6) Change Add Remove	<u>P</u>	Jenny logrand	13A Ulman CT. Palm Coast FL 32164

. If amending or adding additional Articated (attach additional sheets, if necessary).	cles, enter change(s) he	<u>:re</u> :			
(attach additional sheets, if necessary).	(Be specific)				
		<u> </u>	-	<del>.</del>	
			<del></del>		
•					
			<del> </del>		
			<u> </u>		
<u> </u>					
				<del></del> –	
		_ <del></del>			
		-			
	_		<u> </u>		
		·			
<u> </u>					
				·	_
		·			
	<del></del>				
		<u> </u>			
	<del></del>				
<del></del>					
		<u> </u>			

The date of each amendment(s) ad late this document was signed.	option:	, if other than the
•		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will reartment of State's records.	ot be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s).	
There are no members or members adopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
Dated Signature (By the chair	nan or vice chairman of the board, president or other officer-if directors	
have not bee	n selected, by an incorporator – if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)	
	Tsrael Sanfiago (Typed or printed name of person signing)	
	President	
	(Title of person signing)	