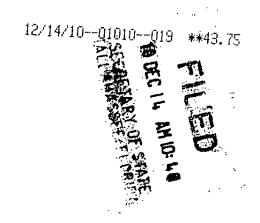
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(Requestor's Name)
(Address)
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: Iglesia Cristia	na Nue	va Visi	on Inc.	
DOCUMENT NUM	BER: N07000006253				
The enclosed Articles	of Amendment and fee are sul	omitted for	filing.		
Please return all corre	spondence concerning this mat	ter to the t	ollowing	:	
		onio Ulei			
	(Name of	Contact F	'erson)		
	(Firm	n/ Compan	у)		
	3550 W	State Ro	ad 46		
	(,	Address)			
	Sanfo	rd, FL 32	771		
	(City/ Sta	te and Zip	Code)		
		@live.co			
	E-mail address: (to be use	d for futu	e annual	report notific	ation)
For further information	on concerning this matter, pleas	e call:			
Pastor Sonia Y. U	llerio	at (321	363-245	55 .
(Name	of Contact Person)		(Area C	ode & Daytii	me Telephone Number)
Enclosed is a check for	or the following amount made p	oayable to.	the Florid	la Departmen	t of State:
□\$35 Filing Fee	☑ \$43.75 Filing Fee & Certificate of Status	Certif	3.75 Filin ied Copy tional cop sed)	_	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis	ng Address Idment Section Ion of Corporations Box 6327		Amend Divisio	Address ment Section n of Corporation Building	,

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with	the Florida Dept	. of State)
N07000006253	,	
(Document Number of Corpora	tion (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute the following amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not</i>	For Profit Corporation adopts
A. If amending name, enter the new name of the corporation	on:	
n/a		
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may no		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	n/a	
	· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a	
(Manning and Coo Mark Berlin Qual Calling Both)		
		10 E
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad		da, enter the nation of the
	n/a	100 mg
Name of New Registered Agent:	11/4	
New Registered Office Address: (Flor	rida street address,)
		, Florida
	(City)	(Zip Code)

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) **Type of Action** Title <u>Address</u> <u>Name</u> T Miguel Santiago 3550 W SR 46 ☐ Add ☑ Remove Sanford, FL 32771 **Douglas Gilmore** BM 1013 Olive Avenue T Julio A. Vega, Pastor 324 Lake Daisy Loop E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Type of Action: Add(BM)Brunilda Alfaro, 331 Johnson Court, Orlando, Fl. 32801

The date of each amendment(s)	adoption: November 18, 2010
•	(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 a was/were sufficient for approve	adopted by the members and the number of votes cast for the amendment(s) val.
There are no members or men adopted by the board of direct	mbers entitled to vote on the amendment(s). The amendment(s) was/were tors.
Dated Novem	nber 18, 2010
Signature	Sullier
have n	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator — if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
_	Sonia Y. Ulerio
_	(Typed or printed name of person signing)
_	VPS
_	(Title of person signing)

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