

Florida Department of State
Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
IGLESIA PAZ PARA EL CORAZON INC.**

Certificate of Status	0
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Corporate Filing Menu

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1/28/2022 12:43:55 PM PAGE 1/001 Fax Server



January 28, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

IGLESIA PAZ PARA EL CORAZON INC.
80 WEST 49TH STREET
BIALEAH, FL 33012

SUBJECT: IGLESIA PAZ PARA EL CORAZON INC.
REF: N0900000658

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

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) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

FAX Aud. #: H21000457828
Letter Number: 322A00002283

Articles of Amendment
to
Articles of Incorporation
of

IGLESIA PAZ PARA EL CORAZON INC

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

N09000000658

(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:

N/A

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

WALTER CRUZ

683 W 26 STREET

MIAMI, FL 33010

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

683 W 26 STREET

MIAMI, FL 33010

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

WALTER CRUZ

683 WEST 26 STREET

New Registered Office Address:

(Florida street address)

MIAMI

(City)

Florida

33010

(Zip Code)

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OF FLORIDA

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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

Walter Cruz

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)

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input checked="" type="checkbox"/> Change ___ Add ___ Remove	<u>P/S</u>	<u>ONELIO PEREZ</u>	<u>683 W 26 STREET</u> <u>HIALEHA, FL 33010</u>
2) <input checked="" type="checkbox"/> Change ___ Add ___ Remove	<u>VP</u>	<u>WALTER CRUZ</u>	<u>683 W 26 STREET</u> <u>HIALEHA, FL 33010</u>
3) <input checked="" type="checkbox"/> Change ___ Add <input checked="" type="checkbox"/> Remove	<u>VP</u>	<u>ILCIA GARCIA</u>	<u>683 WEST 26 STREET</u> <u>HIALEAH, FL 33010</u>
4) <input checked="" type="checkbox"/> Change ___ Add ___ Remove	<u>T</u>	<u>JOSE PENA</u>	<u>683 WEST 26 STREET</u> <u>HIALEAH, FL 33010</u>
5) <input checked="" type="checkbox"/> Change ___ Add ___ Remove	_____	_____	_____
6) <input checked="" type="checkbox"/> Change ___ Add ___ Remove	_____	_____	_____

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

The date of each amendment(s) adoption: 01/24/2022
date this document was signed. _____, if other than the

Effective date if applicable: _____
(no more than 90 days after amendment file date)

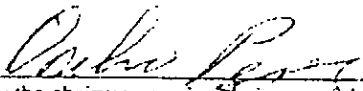
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 01:24:2022 _____

Signature 
(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, or other court appointed fiduciary by that fiduciary.)

ONELIO PEREZ _____
(Typed or printed name of person signing)

PRESIDENT/PASTOR _____
(Title of person signing)