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To:

Civision of Corporations

Fax Number : (850)617-6380

From:

Account Name : FASTKIT CORP Account Number : I20100000009 Phone : (305)599-0839 Fax Number : (305)592-9591

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

COR AMND/RESTATE/CORRECT OR O/D RESIGN
COMUNIDAD BIBLICA PRESBITERIANA CUMBERLAND OF
MIAMI,

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1.2024

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Articles of Amendment to Articles of Incorporation 2024 AUS -6 PH 12 10

COMUNIDAD BIBLICA PRESBITERIANA CUMBERLAI	ND OF MIAMI, INC.	COPHE JARY OF STATE.
Name of Corporation as currently filed with the Florida L	Dept. of State)	
N09000005627		
(Document Number	er of Corporation (if know	vn)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For P</i>	rofit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
ame must be distinguishable and contain the word "corporate Company" or "Co." may not be used in the name.	ion" or "incorporated" o	The new restriction "Corp." or "Inc."
. Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADDRESS</u>)		
,		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
_		
. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	e address in Florida, ent dress:	er the name of the
Name of New Registered Agent:		
		·
New Registered Office Address:	(Florida	street addiess)
***************************************	· · · · · · · · · · · · · · · · · · ·	, Florida
	(Ciṇ)	(Zip Code)
ew Registered Agent's Signature, if changing Registered A creby accept the appointment as registered agent. I am fami	gent: lliar with and accept the o	bligations of the position.
		•
Cin	nature of New Registered.	

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 hold. 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.

	1, 5211 , 511,	in, or us un naa,	
Example: X Change X Remove X Add	Y Mik	n Doe ce Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add	Director	ADA DURAN	8051 NW 200 TERRACE HIALEAH FL 33015
 X Remove 2) X Change Add 	Director	MARIA ELENA NAVARRO	4725 SW 5 TER MIAMI FL 33134
Remove 3)	Secretary	GEORGINA GOMEZ	1480 E 8TH AVE HIALEAH FL 33010
4) Change x Add	Treasurer	RENE FERMIN RODRIGUEZ	14811 SW 186 ST MIAMI FL 33187
Remove 5) Change Add			
Remove 6) Change Add			1
Remove E. If amending or additional sh	ding additional A reets, (Inecessary).	rticles, enter change(s) here: (Be specific)	

Adoption of Amendment(s)

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of voices cast for the amendment(s)

There are no ment.
adopted by the board or members entitled to vote on the
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Allowa-
Dated AUGUST 05, 2024
Signature
(By the chairman and th
have not been selected by at
have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
MARDOQUEO MUNOZ
TO THE STATE OF TH
(Typed or printed name of person signing)
, same of person signing)
PASTOR
Title
(Title of person signing)