

1409000009263

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

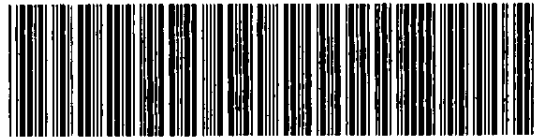
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2010 FEB -9 PM 3:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

NC/Amend
[Signature]



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 1, 2010

HUGO ANTONIO MEJIA
MINISTERIO PENTECOSTES A DIS SEA LA
5981 WESTFALL ROAD
LAKE WORTH, FL 33463

SUBJECT: MINISTERIO PENTECOSTES A DIO SEA LA GLORIA INC.
Ref. Number: N09000009263

We have received your document for MINISTERIO PENTECOSTES A DIO SEA LA GLORIA INC. 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 application/form submitted does not meet the requirements of this office; please complete the attached application/form.

IN ORDER TO ADD THE (S) IN THE CORPORATION NAME YOU WOULD NEED TO COMPLETE THE ENCLOSED ARTICLES OF AMENDMENT TO MAKE A CHANGE IN THE NAME.

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) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 910A00001106

RECEIVED

2010 FEB -9 AM 8:00

SECRETARY OF STATE
TALLAHASSEE-FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ministerio Pentecostes A Dio Sea la gloria
Name of Corporation

DOCUMENT NUMBER: _____

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hugo Antonio Mejia
Name of Contact Person

Ministerio Pentecostes A Dio Sea la Gloria
Firm/Company

3850 Lake worth Rd. #4 6A1
Address

Lake worth Florida 33461
City/State and Zip Code

mejia@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hugo A. Mejia at (561) 729-3565
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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 Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Ministerio Pentecostes A Dios sea la gloria INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

NO9000009263

(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:

Ministerio Pentecostes A DIOS sea la gloria INC.
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)

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

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

(City)

Florida

(Zip Code)

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.

Signature of New Registered Agent, if changing

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TALLAHASSEE, FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	

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

no Agent Change or replace just a
 Small correction on the corporation
 name

The date of each amendment(s) adoption: 2/3/10
(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 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 2/3/10

Signature [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)

Hugo A. Mejia
(Typed or printed name of person signing)

President
(Title of person signing)