

## Florida Department of State

**Division of Corporations** Public Access System

**Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H090002285073)))



H080002285073ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

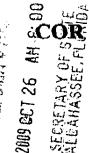
: (850)617-6380 Fax Number

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number

: (305)220-1440



## AMND/RESTATE/CORRECT OR O/D RESIGN

#### MINISTERIO BUEN DADOR INC

and the second second second second	
Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

of 1

# H09000228507

Articles of Amendment

Articles of Incorporation

	of	_	j	
MINISTERIO E	Suen	DADOR	INC	
(Name of Corporation as current)	y filed with t	he Florida Dept. of Sta	ite)	
N09000	0009	702		
(Document Number	r of Corporati	on (if known)		
Pursuant to the provisions of section 617.1006, Flo the following amendment(s) to its Articles of Incor-	orida Statutes, poration:	this Florida Not For P	rofit Corporation a	dopts .
A. If amending name, enter the new name of the	e corporation	<u>1:</u>		
The new name must be distinguishable and conta abbreviation "Corp," or "Inc." "Company" or "Comp	in the word Co." may not	"corporation" or "inco be used in the name.	orporated" or the	
B. Enter new orincipal office address, if applica (Principal office address MUST BE A STREET A	ble: DDRESS)	· · · · · · · · · · · · · · · · · · ·		
				<u> </u>
				2 C
C. Enter new maiting address, if applicable:	D4) va		AS	TA8
(Mailing address MAY BE A POST OFFICE)	<u>вох</u> ) .			
•		· · · · · · · · · · · · · · · · · · ·	•	PN 12:
•			<u>5</u>	
D. If amending the registered agent and/or regis	stered office a	iddress in Florida, ent	া er the name of the	in L
new registered agent and/or the new register	ed office add	ress:		
Name of New Registered Agent:			<del></del>	
			_	
New Registered Office Address:	(Floria	la street address)		
<del>-</del>		(City)	_, Florida (Zip Code)	
New Registered Agent's Signature, if changing R	revistored Au	ent.		
I hereby accept the appointment as registered agreement position	ent. I am fi	miliar with and accep	t the obligations o	of the
Signo	iture of New I	Registered Agent, if cha	nging	

Page 1 of 3

## H09000228507

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)

	Title VI>	NAME VITALINA HERNAND	Address CZ	Type of Action  Add Remove
	VP_	JUANG PEREZ	14404 SW 158 CT Miami FL 33191	☑ Add □ Remove
k				☐ Add ☐ Remove
ı	E. If amending (all ach addition	g or adding additional Articles, enter chional sheets, if necessary). (Re specific)	nange(s) here: 	
		·		
			-	

, .> FROM:LAZARUS

FAX NO. :3052201440

Oct. 26 2009 05:28PM P4

## H09000228507

The date of each amendment(s	) adoption: 10-26-09					
Effactive data if upplicables	(date of adoption is required)					
Effective date <u>if applicable</u> : _	(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 10-26-09  Signature × (By the charman of 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)  LINDA GUERRA  (Typed or printed name of person signing)						
(Title of person signing)						

Page 3 of 3

H09000228507