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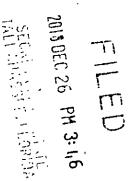
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TO: Amendment Section Division of Corporations

Puerta del Cielo, Inc.		
bmitted for filing.		
tter to the following:		
(Name of Contact Pe	erson)	
(Firm/ Company	')	
(Address)		
(City/ State and Zip (Code)	· · · · · · · · · · · · · · · · · ·
ed for future annual rep	ort notification	1)
e call:		
at	786	208-6686
		(Daytime Telephone Number)
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_ 1 t	bmitted for filing. tter to the following: (Name of Contact Perform/ Company) (Address) (City/ State and Zip Contact Perform/ Company) (Address) (City/ State and Zip Contact Perform/ Company) (Address) (Address)	bmitted for filing. tter to the following: (Name of Contact Person) (Firm/ Company) (Address) (City/ State and Zip Code) ed for future annual report notification e call: 786 at (Area Code) payable to the Florida Department of State Certified Copy (Additional copy is certification (Additional copy is enclosed)

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Casa de Oracion - Puerta del Cielo, Inc

(Name of Corporation	as currer	itly filed with the Florida	Dept. of State)
N10000001122			
(Docur	nent Numb	per of Corporation (if knows	1)
Pursuant to the provisions of section 617,1006, Flo amendment(s) to its Articles of Incorporation:	rida Statuti	es, this <i>Florida Not For Pro</i>	ofit Corporation adopts the following
A. If amending name, enter the new name of the	e corporat	ion:	
N/A			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		tion" or "incorporated" or	
B. Enter new principal office address, if applica		N/A	
Principal office address <u>MUST BE A STREET A</u>	DDKESS)	
			13.50
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)	170 NE 10th Street	JEC 26
		Apartment # 205	P
		Homestead, Florida 3303	بن بن
O. If amending the registered agent and/or registered agent and/or the new register			r the name of the
Name of New Registered Agent:	SAME - (Only the Address Change.	
	170 NE 1	0th. Street, Apartment # 20:	5
New Registered Office Address:	•	(Florida	street address)
	Homestea	d	, Florida 33030
		(City)	(Zip Code)
New Registered Agent's Signature, if changing R	Registered	Agent:	
hereby accept the appointment as registered agen	t. I am fai	miliar with and accept the o	bligations of the position.
_		ignature of New Registered	toant it abannium
	3,	ignaaire oj ivew kegistered	Agem, ij 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: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			···
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
		Dana 2 - 6 4	

attach additional sheets, if necessary).	cles, enter change(s (Be specific)			
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			 <u>.</u> .	
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 The	date of each ame	ndment(s) adoption:	_, if other than the
	e this document was ective date <u>if appli</u>	December 14th, 2018	
1211	tenve date <u>ir appn</u>	(no more than 90 days after amendment file date)	
		ted in this block does not meet the applicable statutory filing requirements, this date will not late on the Department of State's records.	be listed as the
Ade	option of Amendm	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s was/were sufficient	was/were adopted by the members and the number of votes east for the amendment(s) nt for approval.	
	There are no mem adopted by the bo	abers or members entitled to vote on the amendment(s). The amendment(s) was/were pard of directors.	
	Dated	December 14th, 2018	
	Signaturo		_
		(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 frauciary by that fiduciary)	
		Agenor Neira Martinez	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	