## 110000004990

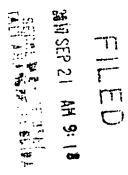
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATE	Iglesia De Dios Toqu	ie De Amor In Orlai	ndo Inc.	
DOCUMENT NUMBER:	N10000004990			
The enclosed Articles of An	nendment and fee are subn	nitted for filing.		
Please return all correspond		_		
Peter Rivera Jr.		·		
· · · · · · · · · · · · · · · · · · ·		(Name of Contact P	erson)	
Iglesia De Dios Toque De A	Amor In Orlando Inc.			
		(Firm/ Compan	y)	
PO BOX 677152				
	<del></del>	(Address)		
Orlando, Fl. 32867				
		(City/ State and Zip	Code)	
peter_0691@hotmail.com				
	-mail address: (to be used	for future annual rep	port notification	)
For further information conc	erning this matter, please	call:		
Peter Rivera Jr.		at	352	874-0735
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida	Department of S	State:
S35 Filing Fee	□\$43.75 Filing Fee & U Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi is Certifi	D Filing Fee leate of Status led Copy lional Copy is sed)
Mailing A	Address	St	reet Address	•

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	ently filed with the Flor	ida Dept. of State)
N0000004990		
(Document Nun	iber of Corporation (if ki	nown)
fursuant to the provisions of section 617.1006. Florida Statumendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
t. If amending name, enter the new name of the corpora	ntion:	
Holy Movement Church Orlando Inc.		The new
ame must be distinguishable and contain the word "corpor Company" or "Co," may not be used in the name.	ation" or "incorporated	" or the abbreviation "Corp," or "Inc."
B. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS	n/a	
2. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a	SEP SEP
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office  Name of New Registered Agent: n/a		enter the name of the
New Registered Office Address:	(Fle	orida street address)
		Florida
	(City)	(Zip Code)
lew Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am f	d Agent: amiliar with and accept	the obligations of the position.
	Signature of Nove Duraint	pred town 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:  X Change X Remove X Add	PT         John D           V         Mike John S           SV         Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	n/a		
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			<del></del> .
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	<del></del>		
Remove			

n/a	
<del> </del>	

The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	9-3-17	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date witness of State's records.	ll not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopt was/were sufficient for approval.	ted by the members and the number of votes cast for the amendment(s)	)
There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
Dated <u>Q-3-13</u>		
Signature		
have not been s	n or vice chairman of the board, president or other officer-if directors elected, by an incorporator – if in the hands of a receiver, trustee, or binted fiduciary by that fiduciary)	
	Peter Rivera JR.	
	(Typed or printed name of person signing)	
	tresident	
	(Title of person signing)	