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Special Instructions to	Filing Officer:	
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Anne/M



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: IGREJA PENT	ECOSTAL GEDEOI	ES DA ULTIMA HOF
DOCUMENT NUM	BER: N10000005970		
The enclosed Articles	s of Amendment and fee are sub	mitted for filing.	
Please return all corre	espondence concerning this matt	er to the following:	
		ANDA LOLA	
	(Name of	Contact Person)	
	SM	ART TAX	
	(Firm	/ Company)	
	513 E.	SAMPLE RD	
	(A	Address)	
	POMPANO I	BEACH, FL 33064	
	(City/ Stat	e and Zip Code)	
	FERNANDA@T E-mail address: (to be use	HESMARTTAX.COM	tification)
For further information	on concerning this matter, please	e call:	
FERNANDA LOL	A	at (954 ₎ 782-	3610
(Name	of Contact Person)	at (954) 782- (Area Code & D.	aytime Telephone Number)
Enclosed is a check t	or the following amount made p	ayable to the Florida Depart	ment of State:
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section of Corporation Building 2661 Executive Corporation Tallahassee, FL 3	orations Center Circle

Articles of Amendment to Articles of Incorporation of



·		10 0CT 27 000
IGREJA PENTECOSTAL GEDEOES D (Name of Corporation as currently filed with the composition of the compositio	A ULTIMA HORA	INC PH L.
(Name of Corporation as currently filed with	the Florida Dept. of Stat	ALLAHASSE OF STAT
N1000005970	<i>:</i>	
(Document Number of Corporati	ion (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes the following amendment(s) to its Articles of Incorporation:	, this <i>Florida Not For Pr</i> o	ofit Corporation adopts
A. If amending name, enter the new name of the corporatio	<u>n:</u>	
IGREJA PENTECOSTAL GIDEOES DA ULTIMA	HORA EM RESTAUF	RACAO INC
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may not	"corporation" or "inco. t be used in the name.	rporated" or the
B. Enter new principal office address, if applicable:	501 NW 42nd COURT #210	
(Principal office address MUST BE A STREET ADDRESS)	POMPANO BEACH	I, FL 33064
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	501 NW 42nd COUR	RT #210
	POMPANO BEACH	, FL 33064
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	e address in Florida, ente dress:	er the name of the
Name of New Registered Agent:		_
New Registered Office Address: (Flor	ida street address)	_
		_, Florida (Zip Code)
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A		
I hereby accept the appointment as registered agent. I am position.	familiar with and accep	ot the obligations of the

Signature of New Registered Agent, 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)

<u>Title</u>	Name .	Address	Type of Action
	<u></u>		
			Remove
			☐ Add ☐ Remove
E. If amen	nding or adding additional Art additional sheets, if necessary).	icles, enter change(s) here; (Be specific)	

The date of each amendment(s)	adoption: 10/25/2010
	(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 a was/were sufficient for approv	adopted by the members and the number of votes cast for the amendment(s) al.
There are no members or mer adopted by the board of direct	nbers entitled to vote on the amendment(s). The amendment(s) was/were ors.
Dated 10/25/2	2010 c chairman or vice chairman of the board, president or other officer-if directors
have n	ot been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)
_	JOAO MARCELINO DA SILVA
_	(Typed or printed name of person signing)
_	PRESIDENT
_	(Title of person signing)