# NO00000 7515

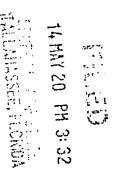
(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



600260381866

05/20/14--01009--013 \*\*35.00



JUN 03 2014 C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Ministerio Apostolico Int. CASA de fe
DOCUMENT NUMBER: 71 1 000007515
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
De. Jose Algaria Delgadillo (Name of Contact Person)
(Firm/ Company)
11373 Sand Hill AVR Sparna Hill Fl. 34608 (Address)
Spring Hill, Flar, dA 34608 (City/ State and Zip Code)
(City/ State and Zip Code)
Jos# Le la dillo That the location future annual report notification)
For further information concerning this matter, please call:
Tose Alexandre Debanillo at (352) 263 7732  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$35 Filing Fee Certificate of Status    \$43.75 Filing Fee Certified Copy (Additional copy is Enclosed)    \$52.50 Filing Fee Certificate of Status (Additional copy is Enclosed)

## **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

(Name of Corporation as currently filed with the Florida Dept. of State)	SA de Re	
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> amendment(s) to its Articles of Incorporation:	on adopts the following	
A. If amending name, enter the new name of the corporation:  CASA defendant ASAMBIRAS de	Dips The new	
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbrevial "Company" or "Co." may not be used in the name.	tion "Corp." or "Inc."	
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 o new registered agent and/or the new registered office address:	f the	
Name of New Registered Agent:		
(Florida street address)  New Registered Office 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	14 HAY	
Page 1 of 4	Y 20 PH C	ļ ,ř

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		Doe 2 Jones 2 Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove		~/>	
2) Change Add		~/_	
Remove 3) Change Add		<u> </u>	
Remove 4) Change Add		<u>~/A</u>	
Remove  5) Change Add		<u>~~/~</u>	
Remove 6) Change Add		<u>~~/~</u>	
Remove			

E. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
~1/A	

	date of each amendment(s) adoption: this document was signed.	, if other than the
Effe	ective date if applicable:  (no more than 90 days after amendment file date)	_
Ado	option of Amendment(s) ( <u>CHECK ONE</u> )	
Ø	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 May 10, 2014 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)	
	JOSE Alcantara Delgadillo  (Typed or printed name of person signing)	
	(Title of person signing)	