## N10000010472

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: ALONSO MIN	IISTRIE	S INC	<u>,</u>	<del></del>
DOCUMENT NUM	BER: N10000010472				
The enclosed Articles	of Amendment and fee are sub	omitted for	r filing.		
Please return all corre	spondence concerning this mat	ter to the	following:		
	<del></del>	DAIRIS			
	(Name of	Contact F	Person)		
	VARGAS PIE	DRA &	COMPANY		
	(Firm	ı/ Compan	y)		
	9100 S DADEL	AND BL	VD STE 912		
	(1	Address)			
	MIAMI, F	LORIDA	33156		
	(City/ Star	te and Zip	Code)		
	DAIRIS@VAF E-mail address: (to be use			tification)	-
For further informatio	n concerning this matter, please	e call:			
DAIRIS		at (	305 ) 671-	0003	
. (Name	of Contact Person)		(Area Code & Da	aytime Telephor	ie Number)
Enclosed is a check for	r the following amount made p	ayable to	the Florida Departr	ment of State:	
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	Certif	•	Certifica Certifie	onal Copy
Amend Division P.O. B	ng Address dment Section on of Corporations ox 6327 assee, FL 32314		Street Address Amendment Section Division of Corpo Clifton Building 2661 Executive Corpo Tallahassee, FL 32	rations enter Circle	

## **Articles of Amendment** to Articles of Incorporation of

## ALONSO MINISTRIES, INC (Name of Corporation as currently filed with the Florida Dept. of State)

N100000104		<del></del>
(Document Number of Corp	ooration (if known)	
Pursuant to the provisions of section 617.1006, Florida Statthe following amendment(s) to its Articles of Incorporation		Profit Corporation adopts
A. If amending name, enter the new name of the corpor	ation:	
N/A		
The new name must be distinguishable and contain the vabbreviation "Corp." or "Inc." "Company" or "Co." ma		
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u></u>	
		i i
		- <del>1</del>
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<u> </u>
D. If amending the registered agent and/or registered of		nter the name of the
new registered agent and/or the new registered office		
Name of New Registered Agent:	N/A	<del></del>
New Registered Office Address: (1	Florida street address)	
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere	ed Agent:	
I hereby accept the appointment as registered agent. I position.		rept the obligations of the
	Y D : 14 : 16	· ·

Signature of New Registered Agent, if changing

	g the Officers and/or Directors, enter		irector being
	itional sheets, if necessary)	neer and/or Director being added	
<u>Title</u>	<u>Name</u>	Address	Type of Action
	N/A		_
			_
			_
(attach ad	ding or adding additional Articles, ent additional sheets, if necessary). (Be spe organization is organized exclusive	ecific)	cational, and
	ourposes, including, for such purp		
	qualify as exempt organizations u		
	Code, or corresponding section o		
	the dissolution of the organization		one or more
	urposes within the meaning of sec		
<del></del>	onding section of any future fede		
	vernment, or to a state or local go		
assets not	t disposed of shall be disposed of	by the court of Common Pleas	of the county in
which the	principal office of the organization	n is then located, exclusively fo	r such purposes
or to such	organziation or organizations, as	said court shall determine, wh	ich are
organized	and operated exclusively for suc	h purposes.	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption: AUGUST 3, 2011		
	(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 adop was/were sufficient for approval.	oted by the members and the number of votes cast for the amendment(s)	
There are no members or member adopted by the board of directors.	rs entitled to vote on the amendment(s). The amendment(s) was/were	
have not b	airman or vice chairman of the poard, president or other officer-if directors seen selected, by an incorporator – if in the hands of a receiver, trustee, of appointed fiduciary by that fiduciary)	
	HERIBERTO ALONSO  (Typed or printed name of person signing)	
	PRESIDENT (Title of person signing)	