## N10000011390

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## **COVER LETTER**

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TO: Amendment Section S Division of Corporation	s				Sold Services
NAME OF CORPORATION	Iglesia De Pentecos	tes, INC			
DOCUMENT NUMBER: _	N10000011390				
The enclosed Articles of Am	endment and fee are subm	itted for filing.			
Please return all corresponde	nce concerning this matter	to the following:			
Rene Rubio					
<del> </del>	(	Name of Contact Pe	rson)		
One Church Broward					
<del></del>		(Firm/ Company	)		
12271 NW 29th PL					
		(Address)			
Sunrise, Florida 33323			_		
	(	City/ State and Zip (	Code)		- <del></del>
contact@onechurchbrow	ard.com				
E	-mail address: (to be used	for future annual rep	ort notification	on)	
For further information conc	erning this matter, please o	eall:			
Rene Rubio		at	954	629-4771	
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)	
Enclosed is a check for the f	ollowing amount made pay	able to the Florida D	Department of	State:	
□ \$35 Filing Fee	■\$43.75 Filing Fee & [ Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certi s Certi (Add	50 Filing Fee ficate of Status fied Copy litional Copy is losed)	
Mailing A Amendme	address nt Section		eet Address nendment Sec	tion	

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**

6 to the state of the state of

Iglesia De Pentecostes, INC		
(Name of Corporation as current N10000011390	tly filed with the Florida Dept. of State)	
<u></u>	er of Corporation (if known)	
	s, this Florida Not For Profit Corporation adopts the followin	
A. If amending name, enter the new name of the corporati	on:	
One Church Broward, INC	The nev	
name must be distinguishable and contain the word "corporat" "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable:	15751 Sheridan Street	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	) <sub>#186</sub>	
	Fort Lauderdale, Florida 33331	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	15751 Sheridan Street	
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	#186	
	Fort Lauderdale, Florida 33331	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a		
N/A  Name of New Registered Agent:	duress.	
	(Florida street address)	
New Registered Office Address:	·	
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent: miliar with and accept the obligations of the position.	
<u></u>	ignature 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)

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	<u>V</u> <u>Mi</u>	nn Doe ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Paul Volan L Jr.	9136B SW 20TH PL
Add			DAVIE, FL 33324
X Remove			
2) Change	D	Neftali Oller	2231 ISLAND DRIVE
Add			MIRAMAR, FL 33023
X Remove			
3 ) Change	D	Eddie L Gann	P.O.BOX 11223
X Add			RockHill, SC 29731
Remove			
4) Change	D	Carlos H Santos	19366 SW 41st Street
X Add	<del></del>		Miramar, Florida 33029
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
•	
<del>-</del>	
_	
<del></del>	
<u> </u>	

Ţhe	date of each amendment(s) ado	ption:	, if other than the
date	this document was signed.		
E ff	3/27/1 ective date <u>if applicable</u> :	16	
		(no more than 90 days after amendment file date)	
	e: If the date inserted in this block ument's effective date on the Department.	c does not meet the applicable statutory filing requirements, this date will nurtment of State's records.	ot be listed as the
Ado	option of Amendment(s)	( <u>CHECK ONE</u> )	
	The amendment(s) was/were ado was/were sufficient for approval.	pted 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 s.	
	3/27/16 Dated		
	Signature		
	(By the chairm have not been	nan or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or prointed fiduciary by that fiduciary)	
	Rene Rut	oio	
		(Typed or printed name of person signing)	
	Presiden	t	
	<del></del>	(Title of person signing)	