

N10 0000 11463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

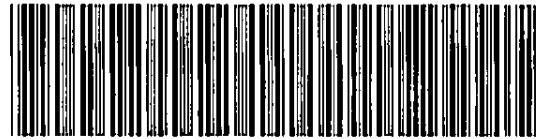
Special Instructions to Filing Officer:

Complete application

(NO\$)

Office Use Only

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To



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09/09/21--01010--002 **35.00

FILED
2021 AUG 25 AM 11:52
SECRETARY OF STATE
MASSACHUSETTS

Name Change

OCT 06 2021

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SANTA IGLESIA GNOTICA CRISTIANA UNIVERSAL SAMAELAUN WEOR CORP

DOCUMENT NUMBER: N10000011463

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

TABORA, CARLOS E

(Name of Contact Person)

SANTA IGLESIA GNOTICA CRISTIANA UNIVERSAL SAMAELAUN WEOR CORP

(Firm/ Company)

5601 COLLINS AVE APT. M11

(Address)

MIAMI BEACH FL 33140

(City/ State and Zip Code)

info@gnosisflorida.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TABORA, CARLOS E

786

693-0620

at

(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:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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2021 AUG 25 AM 11:52
SECRETARY OF STATE
TALLAHASSEE, FL



August 17, 2021

Diane Cushing
Senior Section Administrator
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

REF. NUMBER: N10000011463

Dear Ms. Cushing,

In response to your letter dated July 21, 2021, we are enclosing the following:

- A check for \$35.00 made payable to the Department of State
- A copy of the letter previously sent
- The Missing Pages of the document previously filed along the filing itself

Should you have any questions, please contact us. Thank you for your assistance in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Senen Garcia', written over a horizontal line.

Senen Garcia, Esq.



2021 AUG 25 PM 2:23

FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 21, 2021

CARLOS E TABORA
SANTA IGLESIA GNOSTICA CRISTIANA UNIVERS
5601 COLLINS AVE., APT M11
MIAMI BEACH, FL 33140

SUBJECT: SANTA IGLESIA GNOSTICA CRISTIANA UNIVERSAL SAMAEL
AUN WEOR CORP
Ref. Number: N10000011463

We have received your document for SANTA IGLESIA GNOSTICA CRISTIANA UNIVERSAL SAMAEL AUN WEOR CORP, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

You failed to submit the complete application. You are missing some pages.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 821A00016930

Articles of Amendment
to
Articles of Incorporation
of

SANTA IGLESIA GNOSTICA CRISTIANA UNIVERSAL SAMAELAUN WEOR CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

N10000011463

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

SCHOOL FOR INNER DEVELOPMENT Inc

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

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 of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street 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

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TALLAHASSEE, FL.

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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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

- ☐ 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 February 12, 2021

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)

CARLOS E. TABORA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)