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(Re	questor's Name)			
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COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: JESUS T	HE HEALE	R INC
DOCUMENT NUMBER: N11000000	595	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
RENE GUZMAN		
	(Name of Contact Person	n)
JESUS THE HEALER IN	NC	
	(Firm/ Company)	
1630 PLEASANT HILL F	RD	
	(Address)	
KISSIMMEE FLORIDA 3	34746	
	(City/ State and Zip Cod	e)
info@nadiesaben	nas.com	
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
RENE GUZMAN	_{at (} 407	508-8805 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Dep	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations	Amend Division	Address dment Section on of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED 2014 JAN 21 PM 4: 45

JESUS THE HEALER, INC

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

N11000000595

SECULIATION OF STATE
SECULIATION OF STATE
TALL AHASSEE, FLORIDA

(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:

unendment(s) to its Articles of Incorporation:	
a. If amending name, enter the new name of the corpo	
JESUS THE HEALER CHURCH, IN	NC The ne
ame must be distinguishable and contain the word "corpo Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." or "Inc.
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRES	<u>SS</u>)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4696 ROSS LANIER LANE
	KISSIMMEE FL 34758
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	, Florida
(Ci	ity) (Zip Code)
ew Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am	
Signature of N	lew Registered Agent, if changing

Page 1 of 4

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>Mike</u>	n <u>Doe</u> e <u>Jones</u> y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	S	Yesenia Berrios	1523 Nature Trail
Add			Kissimmee FL 34746
X Remove			
2) Change	S	Belen Cruz	3239 Murray Hill Loop
X			Kissimmee FL 34758
Remove			
3) Change		N	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u></u>
Remove			
6) Change			
Add			
Remove			

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

	e date of each amendment(s) adoption: JANUARY 15, 2014	, if other than the
date	this document was signed.	
Eff	ective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
Ad	option of Amendment(s) (<u>CHECK ONE</u>)	
	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 01/15/2014	
	Signature Rese Lynnam	_
	(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)	_
	RENE GUZMAN	
	(Typed or printed name of person signing)	
	PRESIDENT (PASTOR)	
	(Title of person signing)	