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(Requ	uestor's Name)	
(Addr	ess)	
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(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	ne)
(Docu	 ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

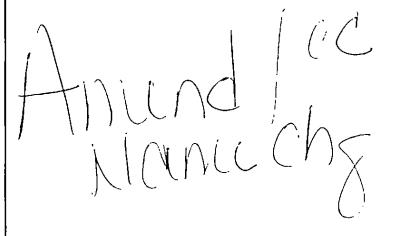




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OCT 0 3 2018

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Confraternidad de Pastores Unidos Inc. DOCUMENT NUMBER: N 11000000 964 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Cabriel E. Vientos Rosa
(Name of Contact Person) Confraternidad de Pastores Unidos Inc.
(Firm/Company) 26680 AVVOW Court
(Address) Bonita Springs Fl 34135
(City/State and Zip Code) 9 ab 2290@ yahoo. Com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Oabriel E. Vientos at 239-240-0881

(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 □ \$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment

to

Articles of Incorporation

	of
Confraternidad de	Pastores Unidos Inc
	rrently filed with the Florida Dept. of State)
N110000009	64
(Document N	umber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	
Asociación de Iglesias Per	nterostales unides en Santidadithe new poration" or "incorporated" or the abbreviation "Corp." or "Inc."
name must be distinguishable and contain the word "corp" "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	26680 Arrow C+
(manag autres)	Bonita Springs, F1 34135
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered offi	
Name of New Registered Agent:	Gabriel E. Vientos Kosa
	Gabriel E. Vientos Rosa 26680 Arrow C+ (Florida strees address)
New Registered Office Address:	(Florida street address)
	Bonita Springs Florida 34/35
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe	ered Agent:
I hereby accept the appointment as registered agent. I a	m familiar with and accept the obligations of the position.
	Signature of New 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>Doe</u> Jones Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	_5_	Gabriel E. Vientos Rosa	Bonita Springs, Fl
Remove			34/35
2) Add		Rev. Wilfredy Troche	8969 90th Terrace Seminole, Fl
Remove 3) \(\sum_{\text{Change}} \)		Rev. Basilio Garcia	33777 19228 Brewer Rd.
Add Remove			Land OLakes, F1 34638
4) Change Add Remove			
5) Change Add			
Remove			· · · · · · · · · · · · · · · · · · ·
6) Change Add			
Remove			

f amending or adding additiona utach additional sheets, if necess	ary). (Be spec	cific)			
					
					
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The date of	each amendment(s) adop	tion: <u>9/24/</u>	2018	if other than the
date this doc	ument was signed.			
Effective da	te <u>if applicable</u> :	(no more than 90 days a	fter amendment file date)	
	date inserted in this block effective date on the Depar		statutory filing requirement	nts, this date will not be listed as the
Adoption of	Amendment(s)	(<u>CHECK ONE</u>)		
	endment(s) was/were adopre sufficient for approval.	ted by the members and the	number of votes cast for th	e amendment(s)
	re no members or member I by the board of directors.	s entitled to vote on the amer	ndment(s). The amendmen	n(s) was/were
	Dated $\frac{9/2}{}$	4/2018		
	` •	n or vice chairman of the boselected, by an incorporator	•	
		ointed fiduciary by that fidu		
		Cev. Jsyael (Typed or printe	Villegas ed name of person signing)	
		Preside	e of person signing)	