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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION:	N DE IGLESIAS PEN	HECO		NIDAS EN SATIDAD, INC.
DOCUMENT NUMBER:N11000000964		••		
The enclosed Articles of Amendment and fee are	submitted for filing.			
Please return all correspondence concerning this i	matter to the following	g:		
	Rev. Israel Vill	egas		
	(Name of Contac	t Perso	on)	
ASOCIACION DE IGLES	SIAS PENTECOSTAI	LES U	NIDAS EN	SATIDAD, INC.
	(Firm/ Comp	any)		
	3123 Baird .	Ave		
	(Address	;)		
	Lakeland, FL	33805		
	(City/ State and 2	Zip Coo	de)	
	titotorres74@g	mail.co	om	
E-mail address: (to be	used for future annual	report	notification	
For further information concerning this matter, pl	ease call:			
Rev. Israel Villegas		at	(813)	704-1345
(Name of Contact Pe	rson)		rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount mad	de payable to the Flori	da Dep	partment of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of State			Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section			t Address dment Secti	on

Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

ASOCIACION DE IGLESIAS PENTECOSTALES UNIDAS EN SATIDAD, INC.

(Name of Corporation as currently filed with the	Florida I	Dept. of State)			-
		N11000000964			
(Docum	ent Numb	er of Corporation (if k	nown)		-
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statute	es, this <i>Florida Not Fe</i>	or Profit Corporation adopts	the following	ıg
A. If amending name, enter the new name of the	corporat	ion:			
ASOCIACION DE IGLESIAS I	PENTECO	STALES UNIDAS E	N SANTIDAD, INC.	The nev	4 .
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		tion" or "incorporated	d" or the abbreviation "Corp		
B. Enter new principal office address, if applical	ble:	N/A	•	2070	
(Principal office address MUST BE A STREET A.)		· (; ·
				1	
				co	į i
C. Enter new mailing address, if applicable:		N/A		PH 2:	مرين سياد
(Mailing address MAY BE A POST OFFICE I	<u>BOX</u>)			<u>्य</u> ्	••
			······		
					_
D. If amending the registered agent and/or regis	tered offic	ce address in Florida	enter the name of the		
new registered agent and/or the new registere			the name of the		
Name of New Registered Agent:	N/A				
					-
		(Fi	lorida street address)		-
New Registered Office Address:	N1/ A				
	N/A	(C:-)	, Florida (Zip Code)		=
		(City)	(Zip Code)		
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent			the obligations of the position	on.	
-	Iss	I V-db			
_	Si	gnature of New Regist	ered 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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	N/A	N/A	N/A
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove		,	
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee)		onal Articles, enter change(s) here: ssary). (Be specific)	
N/A			
			
· · · · · · · · · · · · · · · · · · ·			

•				
				
				
			_ -	 _
	<u> </u>			
				
	· · · · · · · · · · · · · · · · · · ·			
				
The date of each amendment	t(c) adaption	N/A		if other than the
date this document was signed				n oner man me
date una document was signed				
Effective date if applicable:	N/A			
in approximately		o more than 90 days after amendmen	t file date)	** *
Note: If the date inserted in th	is block doe	not meet the applicable statutory filin		listed as the
document's effective date on t	ne Departme	i of State's records.		
Adoption of Amendment(s)		CHECK ONE)		
☐ The amendment(s) was/w was/were sufficient for ap	vere adopted oproval.	y the members and the number of vot	es cast for the amendment(s)	

There are no memadopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.
Dated	5/29/2020
Signature	I and Willean
	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)
	Rev. Israel Villegas
	(Typed or printed name of person signing)
	President
	(Title of person signing)