# 111000005470

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AUG 2 3 2013 T. BROWN

# **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION: Ministerio Nueva Esperanza III Troc.			
DOCUMENT NUMBER: 11000005470			
The enclosed Articles of Amends	nent and fee are subm	nitted for filing.	
Please return all correspondence of	concerning this matte	r to the following:	
Ligia Acosta			
		(Name of Contact Person	)
Ministry		·	
		(Firm/ Company)	
249 Breckenridge cir SE			
	<u> </u>	(Address)	
Palm Bay Florida 32909			
		(City/ State and Zip Code	e)
pastoraligia@ E-mail		for future annual report r	notification)
For further information concerning this matter, please call:			
Ligia Acosta		<sub>at (</sub> 321	208 1800
(Name of Contact	Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:			
	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
M olling Addre	200	Street	Addross

## Malling Address

**Amendment Section Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

#### Street Address

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

### Articles of Amendment to Articles of Incorporation of

DINSECRETEUR
13 ALL COPY OF STATE
13 AUG 10 PM 3:36
7 3:3 <sub>5</sub>

Ministerio Nueva Esperanza III Inc.

(Name of Corporation as currently filed with the F	lorida Dept. of State)
V11000005470	Iorlda Dept. of State)
(Document Number of C	
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	itlon:
Ministerio Internacional Kairos Inc.	The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ation" <b>or</b> "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	s)
C. Enter new malling address if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO box 360778
	Melbourne Fl. 32936
D. If amending the registered agent and/or registered of	lice address in Florida, enter the name of the
new registered agent and/or the new registered office	
Name of New Registered Agent:	<del> </del>
New Registered Office Address	(Florida street address)
	. Florida
(City	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am t	
	w Paristanad Agent if changing
Sanature of Na	N HORIGORAL BROOT IT 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>Mil</u>	n Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u> </u>	Michela Trevino	3718 26 st S.W.
Add			Lehigh Acres,Fl.33976
X Remove			
2) Change	<u>s</u>	Bianca Alvarez Acosta	249 Breckenridge cir SE
X Add	,		Palm Bay Fl 32909
Remove			
3) Change	<u>T</u>	Elisa de Moya Jimenez	4750 Silver Heron Dr.
X Add			Melbourne Fl. 32934
Remove			
4) Change	<u>D</u>	Dahel J. Acosta	621 Talavera Rd.
X Add			Weston Fl. 33326
Remove			
5) Change			
Add			
Remove			
6) Change	<del> </del>		
Add			
Remove			•

E.	E. It amending or adding additional Articles, enter change(s) here:  (attach additional sheets, if necessary). (Be specific)				
	(attach additional sheets, if necessary).	(Be specific)			
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	e daté of each amendment(s) adoption: _ e this document was signed.	8-16-2013	, if other than the
Effe	iffective date if applicable:		
		o more than 90 days after amendment file date)	
Add	option of Amendment(s) (C	CHECK ONE)	
	The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)	
	There are no members or members entitle adopted by the board of directors.	led to vote on the amendment(s). The amendment(s) was/were	
	Dated 8-16-2013		
	Signature	ional Osac	<del></del>
	have not been selected	ice chairman of the board, president or other officer-if directors ed, by an incorporator – if in the hands of a receiver, trustee, or if in the fiduciary by that fiduciary)	
	Ligia Acosta		
	(Typed o	or printed name of person signing)	
	Vice President	•	
		(Title of person signing)	