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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: COMUNIDADE	crista em fort myers, inc.
DOCUMENT NUMBER: <u>N110000</u> 676	59
The enclosed Articles of Amendment and fee are submitted for	
Please return all correspondence concerning this matter to the	•
rease retain an correspondence concerning and matter to the	
MARIA MADALENA CALDA	s-Lofes
(Name	of Contact Person)
MADE IN BRAZIL SERVICE	5
(Fi	rn/ Company)
1950 WIND OVENUE	5 tr 501
2950 WINKLER AVENUE	(Address)
Fort myers, FL, 33916	
(City/ S	tate and Zip Code)
MADE IN BRAZILSERVICES HOTMA E-mail address: (to be used for future	IL. Com
E-mail address: (to be used for futt	re annual report notification)
For further information concerning this matter, please call:	
magin manalena colone logge	120 -810, 6039
MARIA MADALENA CALDAS - LOPES (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 & □\$43.7	5 Filing Fee & □\$52.50 Filing Fee
Certificate of Status Certificate	ied Copy Certificate of Status
(Add: enclo	tional copy is Certified Copy sed) (Additional Copy is
enere	Enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment

Articles of Incorporation of

COMUNIDADE CRISTA EM FORT MYERS INC (Name of Corporation as currently filed with the Florida Dept. of State)
N11 0000 6769  (Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
BRAZILIAN FELLOWSHIP CHURCH [1] ( 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: 3309 BROADWAY  (Principal office address MUST BE A STREET ADDRESS)  FORT MYERS, FL 33901
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  FORT MYERS, FL 33907
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: MAKE IN GRAZIL SERVICES
2950 WINKLER AVENUE STE #501
New Registered Office Address: (Florida street address) :- (*-`)
Florida 33916 (City) (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, I 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)

Example:

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.

## X Change PT John Doe X Remove V Mike Jones X Add <u>SV</u> Sally Smith Type of Action Title Name: Address (Check One) PD DA CRUZ, JOSE CARLOS, JR 6656 WAKEFIELD DR. 1) \_\_\_\_ Change X FORT MYERS, FL, 33966 Add \_\_\_\_ Remove VP D COUTINHO, EVERTON 6794 PLANTATION PINES BLVE 2) \_\_\_\_ Change FORT MYERS, FL, 33966 Add Remove SD GOMES DA CRUZ, CAROLINE 3 ) \_\_\_\_ Change 6794 PLANTATION PINES BLVE FORT MYERS, FL, 33966 Add Remove ΤD Damasceno G. dos Anjos, Hildilara 3740 METRO PKWY APT, #1010 4) \_\_\_\_ Change FORT MYERS, FL, 33916 Add Remove D DA CRUZ, ZENILDA G. 6656 WAKEFIELD DR. 5) \_\_\_\_ Change X \_\_ Add FORT MYERS, FL, 33966 \_\_ Remove A. DOS ANJOS, GILMARIO 3740 METRO PKWY APT. #1010 6) \_\_\_\_ Change FORT MYERS, FL, 33916 X Add\_\_\_\_ Remove

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)

Example:

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.

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X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	D	AZEVEDO, JEUDI ELIEL	7164 LYLE TER APT. #2
X Add			FORT MYERS, FL, 33907
Remove			<del></del>
2) Change	<u>D</u>	Regis de Azevedo, Alessandra Maria	7164 LYLE TER APT. #2
X Add			FORT MYERS, FL, 33907
Remove 3) Change			<del></del>
Add			<u> </u>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<del></del>	
Add			
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: 07/01/2024	
Effective date if applicable: 07/01/2024  (no more than 90 days after amendment file date)	
<b>Sote:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will	not be listed as the
locument's effective date on the Department of State's records.	not be noted as the

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

Dated 09 10412024	
Signature Signature	
(By the chairman or vice chairman of the board, president or other officer-if directe have not been selected, by an incorporator – if in the hands of a receiver, trustee, of other court appointed fiduciary by that fiduciary)	
JOSE CARLOS DA CRUZ JR.	
(Typed or printed name of person signing)	

(Title of person signing)