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TEST

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: La Luz Fort Pres	del Mundo I	glesia	del Dias	Vivo Inc	:_
Fort Prea	rie	J			
DOCUMENT NUMBER: N 170000	6809				
The enclosed Articles of Amendment and fee are s	ubmitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
Ruben Pine	da				
·	(Name of Contact Perso	on)			
	(Firm/ Company)				
706 Se Lh 75th St					
104 South 25th St	(Address)				_
Fort Pierce Floric					
	(City/ State and Zip Coo	de)			_
Pruben 771 @ 9 E-mail address: (to be us	mail-com			_	
E-mail address: (to be us	sed for future annual report	notification	1)		_
For further information concerning this matter, plea	se call:				
Rebecca Arreola (Name of Contact Pers	at	407-	721-01	40	
(Name of Contact Pers	on) (A	rca Code)	(Daytime Telep	hone Number)	
Enclosed is a check for the following amount made	payable to the Florida Dep	artment of	State:		
□ \$35 Filing Fee Certificate of Statu	& D\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	O Filing Fee cate of Status ed Copy ional Copy is sed)		
Mailing Address Amendment Section		Address			

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

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

Articles of Amendment

to

Articles of Incorporation

of

La Luz del Mundo Iglesia del Dios 1 (Name of Corporation as curr	ently filed with the Florid	da Dept. of State)	
N 1700000 6809			
(Document Nur	nber of Corporation (if known	own)	
Pursuant to the provisions of section 617.1006, Florida State amendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not For</i>	Profit Corporation	adopts the following
A. If amending name, enter the new name of the corpor	ation:		
NIA			The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration" or "incorporated"	or the abbreviation	n "Corp." or "Inc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRES</u>	<u>s</u>)	/ ^	₩. ౘ .
		 	JUN 2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1.0	
	——————————————————————————————————————	H	99
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		nter the name of t	<u> </u>
Name of New Registered Agent:			
N. D. LOT. AU)(Flor	ida street address)	
New Registered Office Address:	, - ,		
	(City)	, Florid (Zip	la Code)
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am		ne obligations of the	position.
	Signature of New Register	red Agent, if chanvi	ng

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>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	TP	Alex Velasquez	TOS 5,29th St Apt 15E Fort Pierce, FL 34947
2) X Change Add Remove	TR	Bertoldo Molina	Fort Pronce, FL. 34982
3) Change Add Remove			
4) <u>X</u> Change Add Remove	TR	Fedro Moreno	3205 Boston Ave Fort Pierce, FL 34947
5) Change Add Remove			
6) Change Add Remove			

. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)

	the date of each amendment(s) adoption: $\frac{ \psi }{20 E }$	_, if other than the
	fective date if applicable: $6/20/8$ (no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be current's effective date on the Department of State's records.	e listed as the
Ad	loption of Amendment(s) (<u>CHECK ONE</u>)	
Ø	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 <u>6/20/18</u>	
	Signature Replace, Arusla	
	(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)	-
	Rebecca Arrabla (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	Secretary Murch Officer (Trile of person signing)	