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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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TARY OF STATE

Amend & NC

JAN 1 5 2013

T. BROWN

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: Centrale la familie Cristiana le Winter Garlen inc
DOCUMENT NUMBER: N 1/0000 1/037
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jose Alices
(Name of Contact Person)
Centre de le familie Cristiane de Winter Garlen inc. (Firm/Company)
487 Prestwick Pl.
(Address)
Kissimmee, FL, 34759 (City/State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tose Alices at (407) 334-8037 (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 Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

	W.	CRES
Artic	eles of Amendment	04/0/
Articl	to es of Incorporation	V , .
Centro le la familie Cris		'4 <u>n</u> , in
(Name of Corporation as currently filed with the F	lorida Dept. of State)	•
(Document Number of Corpo	pration (if known)	_
·	. ,	
arsuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopts the	e follow
. If amending name, enter the new name of the corpora	ution:	
Gracia en Familia i		m:
me must be distinguishable and contain the word "corpor		The n or "Inc
ompany" or "Co." may not be used in the name.		
Enter new principal office address, if applicable:		_
rincipal office address <u>MUST BE A STREET ADDRESS</u>	D /	
		_
	0 , 0	_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	487 Prestwick Pl.	_
	497 Prestwick Pl. Kissimmee, Fl. 34759	_
		_
		_
If amending the registered agent and/or registered off new registered agent and/or the new registered office		
	AUGI 533.	
Name of New Registered Agent:		
	(Playing street address)	
ew Registered Office Address:	(Florida street address)	
The state of the s	/	
The state of the s	, Florida	

Page 1 of 4

Signature of New Registered 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>V</u> <u>Mik</u>	n <u>Doe</u> e Jones y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	-D (Memb	Nelson Cryz er of Board)	3901 Santa Barbarard. Kissimmee FL. 34746
2) Change	<u>D</u>	Jose Munserrat	1159 Saint Tropezet Kissimmee FL 34759
Remove 3) Change Add Remove			
4) Change Add Remove			
5) Change Add			
Remove 6) Change Add Remove	<u>. </u>		

attach additional s	ding additional Art heets, if necessary).	(Be specific)	I				
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The date of each amendment(s) adoption: January 9, 2013
Effective date if applicable:
(no more than 90 days after amendment file date)
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.
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 January 9, 2013 Signature Agranda
(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)
Jose A. Alicea
(Typed or printed name of person signing)
(Title of person signing)