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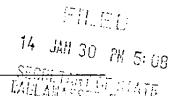
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TO: Amendment Section
Division of Corporations

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NAME OF CORPORATION: ministerio cris	tiano internaciona	l la pesca milagrosa inc
DOCUMENT NUMBER: n11000011	262	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
Valentin Reyes		
	(Name of Contact Person)	
ministerio cristiano interna	acional la pes	sca milagrosa inc
	(Firm/ Company)	
19901 w lake burrell dr		
	(Address)	
tampa fl 33549		
	(City/ State and Zip Code)	
reyesvalentin@yr	mail.com	
•	I for future annual report no	otification)
For further information concerning this matter, please	call:	
valentin reyes	at (813863	2198
(Name of Contact Person)	(Area Coo	le & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Depart	tment of State:
□ \$35 Filing Fee □\$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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division Clifton E 2661 Ex	nent Section of Corporations

Articles of Amendment to Articles of Incorporation of



ministerio cristiano internacional la pesca milagrosa inc

(Name of Corporation as currently filed with the Florida Dept. of State) n11000011262

(Document N	umber of Corp	poration (if knov	vn)		
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes,	this <i>Florida No</i>	t For Profit Corpor	ration adopts the foll	lowing
A. If amending name, enter the new name of the	ne corporation	<u>n:</u>			
					ie new
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nan	rd "corporatio <u>ne</u> .	on" or "incorpo	rated" or the abbre	viation "Corp." or "	'Inc. "
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)				 	
	_		. <u></u>		
	_		· · · · · · · · · · · · · · · · · · ·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	F ROY				
(maining dadress MAT BEATOST OFFICE	<u>- BOX</u>)				
	_	11.00			
				C 41	
D. If amending the registered agent and/or reg new registered agent and/or the new registered.			ida, enter the <u>nam</u>	e of the	
Name of New Registered Agent:					
New Registered Office Address:	(F	lorida street addres	(s)		
		m	, Florida		
	(City)			(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age	Registered A	sgent: iliar with and ac	ecept the obligations	of the position.	

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	PT John De V Mike Jo SV Sally So	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	td	jose santiago	873 colonial dr
Add			tampa fl 33613
X Remove			
2) Change	td	nelson rincon	11539 meredityh st
X			tampa fl 33637
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Chause			
5) Change			·
Add Remove			
Kemove			
6) Change			
Add			
Remove			

. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)			
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	e date of each amendment(s) adoption:	, ii other than the
	e this document was signed.	
Effe	cective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
Ada	option 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 01/27/2014	
	Signature Valsatie Keys	
	(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)	
	PALENTIN PREYES	
	(Typed or printed name of person signing)	
	(Title of person signing)	