## N11000011843

(Reque	stor's Name)	<del></del>
(Addre	ss)	
(Addre	ss)	
(City/Si	tate/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Nam	e)
(Docum	nent Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filir	ng Officer:	
,		

Office Use Only



700297896937

04/13/17--01022--015 \*\*52.50

2817 MAY - 1 PM 12: 34

V HERRING MAY - 2 2017



April 20, 2017

ALBERTO PATRACA RIVAS 1901 9TH ST W A BRADENTON, FL 34205

SUBJECT: IGLESIA DE DIOS EL NUEVO REMANENTE INC.

Ref. Number: N11000011843

We have received your document for IGLESIA DE DIOS EL NUEVO REMANENTE INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Valerie Herring Regulatory Specialist II

Letter Number: 017A00007296

TO: Amendment Section Division of Corporations

## **COVER LETTER**

Iglesa de Dios El Nuevo Remanente Inc.  NAME OF CORPORATION:
N11000011843 DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
Alberto Patraca Rivas
(Name of Contact Person)
Iglesia de Dios El Nuevo Remanente Inc.
(Firm/ Company)
1901 9th St W A
(Address)
Bradenton, FL 34205
(City/ State and Zip Code)
aburto_c@yahoo.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:

Enclosed is a check for the following amount made payable to the Florida Department of State:

(Name of Contact Person)

Cristina Aburto

□ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status

Ccrtified Copy

(Additional copy is enclosed)

■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is

580-2871

(Daytime Telephone Number)

Enclosed)

Mailing Address Amendment Section

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

Street Address

941

(Area Code)

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

## Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATION

2817 HAY - 1 PM 12: 34

Iglesia de Dios El Nuevo Remanente Inc.		
(Name of Corporation	as currently filed with the	Florida Dept. of State)
N11000011843		
(Docu	ment Number of Corporation	(if known)
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Ne</i>	ot For Profit Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:	
Iglesia Pentecostal El Nuevo Remanente Inc.		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		
B. Enter new principal office address, if applica	N/A	
(Principal office address <u>MUST BE A STREET A</u>		
	-	
C. Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE	BOX)	
	, <u> </u>	
<ol> <li>If amending the registered agent and/or registered agent and/or the new registered.</li> </ol>	stered office address in Flor	ida, enter the name of the
	N/A	
Name of New Registered Agent:	1417	***************************************
New Registered Office Address:		(Florida street address)
	N/A	N/A
	(City)	, Florida (Zip Code)
	, ,,	, ,
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		cept the obligations of the position.
		- A make man
_	Signature of New R	egistered 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         PT           X Remove         Y           X Add         SV		Y John Doe Wike Jones SV Sally Smith				
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s		
1) N/A Change		<del></del>				
Adđ						
Remove						
2) N/A Change		-				
Add						
Remove						
3) N/A Change						
		-				
Add				<del></del>		
Remove						
4) N/A Change		_				
Add			· ·			
Remove	,					
5) N/A Change	T.	_				
Add						
Remove						
6) N/A Change		_				
Add						
Remove						

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	<u> </u>			
N/A					
	•				
			-	, , ,	
				<del></del>	
		-			
	<del> </del>	<del> </del>			
	<del></del>				
		· · · · · · · · · · · · · · · · · · ·			·
				· · ·	
·····					
<u> </u>					
				<del></del>	
					. =
	· · · · · · · · · · · · · · · · · · ·				<del></del>
		·	<del></del>		

05/	01/2017	14:32 CHRISTINA		P.007/007
		ch amendment(s) adop ent was signed.	April 6, 2017 tion:	, if other than the
Effe	tive date	if applicable:	(no more than 90 days after amendment file date)	
			does not meet the applicable statutory filing requirements, this date will no tment of State's records.	ot be listed as the
Ado	otion of A	mendment(s)	(CHECK ONE)	
		iment(s) was/were adop sufficient for approval.	ted by the members and the number of votes cast for the amendment(s)	
		no members or member y the board of directors	s entitled to vote on the amendment(s). The amendment(s) was/were	
	D	May 1, 2017	<del> </del>	
	Si	gnature ROMONO		
		have not been	on or vice chairman of the board, president or other officer-if directors selected, by an incorporator — if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
		Ramona Ca	stillo Rivas	
			(Typed or printed name of person signing)	
		Vice Presid	ent	
			(Title of person signing)	