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March 21, 2017

JUAN C. MOLINA 7327 BEAUMONT DR LAKELAND, FL 33810

SUBJECT: EL OASIS DE ESPERANZA INC

Ref. Number: N12000003153

We have received your document for EL OASIS DE ESPERANZA INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Foreign corporation, but your entity is a Florida not for profit corporation. Please complete and return the enclosed blank form(s).

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.

Rebekah White Regulatory Specialist II

Letter Number: 017A00005346





FLORIDA DEPARTMENT OF STATE Division of Corporations

March 2, 2017

JUAN C. MOLINA 7327 BEAUMONT DR LAKELAND, FL 33810

SUBJECT: EL OASIS DE ESPERANZA INC

Ref. Number: N12000003153

We have received your document for EL OASIS DE ESPERANZA INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you have submitted is not acceptable for filing in this office. We only recieved the cover letter. Please submit the rest of the document for proper processing.

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.

Rebekah White Regulatory Specialist II

Letter Number: 317A00004048

COVER LETTER

TO: Amendment Section **Division of Corporations**

EL OASIS DE ESPERANZA, INC. NAME OF CORPORATION:			
N12000003153 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
IUAN C. MOLINA			
(Name of Contact Person)			
EL OASIS DE ESPERANZA, INC.			
(Firm/ Company)			
7327 BEAUMONT DRIVE			
(Address)			
LAKELAND, FL 33810			
(City/ State and Zip Code)			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
TUAN C. MOLINA 863 529-2713 at			
(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) \$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

Street Address

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

Articles of Amendment to Articles of Incorporation of

17 APR -4 AM 11:36

			., ., .,	MATA 05
EL OASIS DE ESPERANZA, INC.			新D 展7 7年	' i 💃 i
(Name of Corporation	as curren	tly filed with the Fl	orida Dept. of State)	3 7 9 6
N12000003153				
(Docum	ent Numb	er of Corporation (if	known)	
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statute	s, this <i>Florida Not I</i>	For Profit Corporation	adopts the following
A. If amending name, enter the new name of the	corporati	<u>ол:</u>		
IGLESIA OASIS DE ESPERANZA, INC.				The nev
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	•	ion" or "incorporat	ed" or the abbreviatio	
B. Enter new principal office address, if applicat	nle:	4405 North Gallow	ay Road	
(Principal office address MUST BE A STREET ADDRESS)		Lakeland, FL 3381)	
 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E) D. If amending the registered agent and/or registered 		P.O. Box 91973 Lakeland, FL 3380-		·ha
new registered agent and/or the new registere			a, cinci the name of	<u>.nc</u>
Name of New Registered Agent:	Juan C. M	olina		
	7327 Beau	mont Drive		
New Registered Office Address:		(Florida street address)	
	Lakeland		, Flori	33810
		(City)		p Code)
New Registered Agent's Signature, if changing R laterally accept the appointment as registered agent			ot the obligations of th	e position.
		Juan C.	Molisia istered Agent, if chang	
	C.	phature of New Reg.	istered Agent, if chang	ring

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: XChange X Remove X Add	PT John Do V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			-
Add			
Remove			
Kemove			
4) Change			
Add			4
Remove			
5) Change			
Add			
Remove			
6) Change			
			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			

E. If amending or adding additional Artication (attach additional sheets, if necessary).	icles, enter change(s)	<u>here</u> :
(attach additional sheets, if necessary).	(Be specific)	
There are not changes in officers position.		
		W-1864-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
		<u> </u>
		
•		
		

	•	03/12/2017	
Fhe	date of each amer	dment(s) adoption:	, if other than the
iate	this document was	signed.	
		04/01/2017	
Effe	ective date <u>if appli</u>		
		(no more than 90 days after amendment file da	ite)
		ed in this block does not meet the applicable statutory filing require te on the Department of State's records.	ements, this date will not be listed as the
۸da	ption of Amendmo	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were sufficien	was/were adopted by the members and the number of votes cast for approval.	or the amendment(s)
	There are no memadopted by the box	pers or members entitled to vote on the amendment(s). The amend and of directors.	lment(s) was/were
	Dated	03/12/2017	
	Signature		
		By the chairman or vice chairman of the board, president or other have not been selected, by an incorporator – if in the hands of a reother court appointed fiduciary by that fiduciary)	
		JUAN C. MOLINA	
		(Typed or printed name of person sign	ing)
		PRESIDENT Juan C. Moline	<u> </u>
		(') (Title of person signing)	