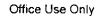
## N1200000 3153

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
LILLINGING the Kicte
Special Instructions to Filing Officer:  Per Alanayara  Anata  English  Eng
8/1/19





200331995612

08/01/19--01007--028 \*+35.00

019. - 1 FT 3: 21

Amend

AUG 0 7 2019

I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION:	S DE ESPERANZA, I	NC.	
N1200000315 DOCUMENT NUMBER:	3		
The enclosed Articles of Amendment and fee are sub-	nitted for filing.		
Please return all correspondence concerning this matter	er to the following:		
Adalberto Burgos			
	(Name of Contact Pers	on)	· · · · · · · · · · · · · · · · · · ·
Iglesia Oasis de Esperanza, Inc.			
	(Firm/ Company)		<u> </u>
939 Burrisridge Dr			
	(Address)		
Lakeland Fl. 33809			
	(City/ State and Zip Co	de)	
Alburg2008@gmail.com			
E-mail address: (to be used	for future annual repor	t notification	1)
For further information concerning this matter, please	call:		
Adalberto Burgos	8 at	63	838-2874
(Name of Contact Person		Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida De	partment of !	State:
■ \$35 Fiting Fee □\$43.75 Fiting Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	icate of Status ied Copy tional Copy is
Mailing Address Amendment Section		t Address	
Amenament Section Division of Corporations		ndment Secti ion of Corpo	

Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

IGLESIA OASIS DE ESPERANZA, INC.

(Name of Corporation as	currently filed with the Florida Dept. of State)	
N12000003153		
(Document	Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For Profit Corporation adop	ots the following
A. If amending name, enter the new name of the con	rporation:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" or the abbreviation "Co	orp," or "Inc."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADD</u>	<u>KESS</u> )	
		20
C. Enter new mailing address, if applicable:	V1	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u> </u>	
		ب:
D. If amending the registered agent and/or registered		2
new registered agent and/or the new registered of	office address:	
Name of New Registered Agent:		
	(Florida street address)	
New Registered Office Address:		
	, Florida	
	(City) (Zip Coo	le)
New Registered Agent's Signature, if changing Regi		
hereby accept the appointment as registered agent. I	l am familiar with and accept the obligations of the post	ition.
	Signature of New Registered Agent, if changing	
	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>M</u>	<u>hn Doe</u> ike Jones ully Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>s</u>	Olga Molina	7327 Beaumont Rd
Add			Lakeland, FI 33810
X Remove			
2) Change	s	Claudia Vidal	3605 Glenoak Dr, S
x Add			Lakeland Fl 33810
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add		,	
Remove			
6) Change			
Add			
Remove			

E.	If amending or adding additional Art	eding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)			
	(attach additional sheets, if necessary).	(Be specific)			
_					
		•			
_					
_					
_				1.1.	
_	* ** <del>-</del>			<del></del>	
		<u>.</u>			
				· ·	<u> </u>
_					
_					
_					
_					-
_		<del></del>		<u>-</u>	
_					
_					
	<u> </u>		<u>.</u> .		
_					

		dment(s) adoption:	, if other than the
aate	this document was	signed.	
Effe	ective date <u>if appli</u> c		
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this date will not te on the Department of State's records.	t be listed as the
Ado	option 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 the amendment(s) t for approval.	
	There are no memi	pers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.	
	Dated	7/27/2019	
	Signature	Just C. Malina	
		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)	
		Juan Carlos Molina	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	

. . . .