# N12000006063

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	ecostal House of Worship Inc		
DOCUMENT NUMBER: N12000006	MENT NUMBER:N12000006063		
The enclosed Articles of Amendment and fee are submitted	d for filing.		
Please return all correspondence concerning this matter to	he following:		
;	 Sonia Becerra 		
(Nar	ne of Contact Person)		
	   Swyft Filings 		
	(Firm/ Company)		
515 Po	şt Oak Blvd. #300		
	(Address)		
Houston, TX 77027			
(City	State and Zip Code)		
filings	l @swyftfilings.com		
E-mail address: (to be used for f	uture annual report notification)		
For further information concerning this matter, please call:			
Sonia Becerra	877-777-0450		
(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:		
(A	3.75 Filing Fee & S52.50 Filing Fee rtified Copy Certificate of Status dditional copy is 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 Articles of Incorporation of

### Mount Olive Pentecostal House of Worship Inc

# (Name of Corporation as currently filed with the Florida Dept. of State) N12000006063 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Galvanizados Por La Verdad Inc. name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. 14405 NW 7th Ave Suit#2 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Miami Florida 33168 C. Enter new mailing address, if applicable: 1120 SW 71 Terrace (Mailing address MAY BE A POST OFFICE BOX) North Lauderdale Florida 33068 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address
1) Change	T	Monica Estr	ella	1250 SE 29Th street unit 101
X Add				Homestead Florida 33035
Remove				
2) Change				
Add	-			
Remove				
3 ) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add		-		
Remove				
/				
6) Change		<u>-</u>		
Add				
Remove			Page 2 of 4	
			1	

E. If amending or adding additional Articles, enter change(s) here:  (attach additional sheets, if necessary). (Be specific)				
(attach additional sheets, if necessary).	(Be specific)			
		<u>.                                    </u>		
	·			
<u> </u>	<del></del>			
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The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date if applicable: 5-1-	
(no more man 90	days after amendment file date)
Note: If the date inserted in this block does not meet the ap- document's effective date on the Department of State's reco	oplicable statutory filing requirements, this date will not be listed as the ords
Adoption of Amendment(s) (CHECK ONE	$ \cdot $
The amendment(s) was/were adopted by the members was/were sufficient for approval.	and the number of votes cast for the amendment(s)
☐ There are no members or members entitled to vote on adopted by the board of directors.	the amendment(s). The amendment(s) was/were
Dated 4/3	9/19
Signature	<u></u>
	of the board, president or other officer-if directors
other court appointed fiduciary by t	porator – if in the hands of a receiver, trustee, or hat fiduciary)
Guillermo A	Carlosa
(Typed c	or printed name of person signing)
· (types	
	President
	(Title of person signing)