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(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
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JIVISION OF CONTERACIONS

Amendice Mandie

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TO:	Amendment Section
	Division of Corporations

•
NAME OF CORPORATION: Tabernaculo Nuevo Comienzo Jacksonville Inc.
DOCUMENT NUMBER: N12000007083
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Martin A. Feliciano
(Name of Contact Person)
Tabernaculo Nuevo Comienzo Jacksonville Inc.
(Firm/ Company)
8363 Oden Ave
(Address)
Jacksonville Florida 32216

(City/ State and Zip Code)

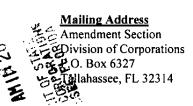
tabernaculonuevocomienzo@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daisy Mejia		_{at (} 904	, 444-0549
(Name of Co	ntact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made payab	le to the Florida Depa	rtment of State:
☐ \$35 Filing Fee	□\$43.75 Filing Fee & ■\$ Certificate of Status	43.75 Filing Fee & Certified Copy	□\$52.50 Filing Fee Certificate of Status

Certificate of Status Certified Copy (Additional copy is enclosed)



Street Address

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

Certified Copy

(Additional Copy is Enclosed)



October 29, 2012

MARTIN A. FELICIANO TABERNACULO NUEVO COMIENZO JACKSONVILLE 8363 ODEN AVE JACKSONVILLE, FL 32216

SUBJECT: TABERNACULO NUEVO COMIENZO JACKSONVILLE INC.

Ref. Number: N12000007083

We have received your document for TABERNACULO NUEVO COMIENZO JACKSONVILLE INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

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.

Letter Number: 812A00026388

Irene Albritton Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

12 NOV 29 PM 12	
12 NOV 20 CERPONS	4
12 NON 59 PH 15: 16	(2 ₁₆

Tabernaculo Nuevo Comienzo Jacks	sonville Inc.	
(Name of Corporation as currently filed with the Flo	rida Dept. of State)	
N12000007083		
(Document Number of Corpora	ation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the follow	
A. If amending name, enter the new name of the corporati	ion:	
	The n	
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	lion" or "incorporated" or the abbreviation "Corp." or "Inc	
B. Enter new principal office address, if applicable:	6383 Oden Ave	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)) Jacksonville Florida 32216	
6 F		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same	
D. If amending the registered agent and/or registered offic	no address in Florida, enter the name of the	
new registered agent and/or the new registered office a		
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	Florida	
(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan		
Signature of New Regist	tered Agent, if changing	

Page 1 of 4

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 D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Martin A. Feliciano	8363 Oden Ave
Add			Jacksonville Florida
Remove			32216
2) Change	V.P	Olga Colon	8363 Oden Ave
X			Jacksonville Florida
Remove			32216
3) Change	T	Ada Quinones	8363 Oden Ave
Add			Jacksonville Florida
Remove			32216
4) Change	S	Daisy Mejia	8363 Oden Ave
Add			Jacksonville Florida
Remove			32216
5) Change		Mildred Osorio	
Add			
X Remove			
6) Change			
Add			
Remove		Page 2 of 4	

attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
-	
	
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The date of each amendmen	t(s) adoption: 10/22/2012
Effective date <u>if applicable</u> :	10/22/2012
<u> </u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/w was/were sufficient for ap	were adopted by the members and the number of votes cast for the amendment(s) opproval.
There are no members or adopted by the board of a	members entitled to vote on the amendment(s). The amendment(s) was/were directors.
Dated	22/2012
have r	e offerman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
Martin	A. Feliciano
	(Typed or printed name of person signing)
Preside	ent
	(Title of person signing)