N12000007120

(Red	questor's Name)			
(Add	lress)			
(Add	dress)			
(City	//State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to F	Filing Officer:			

Office Use Only



600266170966

600266170966 11/12/14--01025--010 **35.00

> SECR. TARY OF STATE DIVISION OF CORPORATIONS 14 NOV 12 PM 3: NO

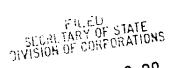
Clewis 14

COVER LETTER

TO: Amendment Section Division of Corporations

•			
NAME OF CORPORATIO	MINISTERIO PIE	EDRA ANGULAR P	ARA LAS NACIONES, INC.
DOCUMENT NUMBER:	N12000007	120	
The enclosed Articles of Ame	endment and fee are subm	itted for filing.	
Please return all corresponder	ice concerning this matter	to the following:	
WILMAN RO	JAS		
VVIEWWATCO		Name of Contact Person)
MINISTERIO PI	EDRA ANGUL	.AR PARA LA	S NACIONES, INC.
		(Firm/ Company)	
PO BOX 935	186		
		(Address)	
MARGATE, F	L 33093		
	(City/ State and Zip Code)
ROPA	S150@AOL	COM	
E-	mail address: (to be used	for future annual report r	iotification)
For further information conce	rning this matter, please of	call:	
WILMAN RO	JAS	_{at (} 754	234-0704 de & Daytime Telephone Number)
(Name of Con	tact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the fo	llowing amount made pay	vable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & I Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
P.O. Box 6	t Section Corporations	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation



MINISTERIO PIEDRA ANGULAR PARA LAS NACIONES, INC 14 NOV 12 PM 3: 09

filed with the Flo	rida Dept. of State)	
nent Number of Co	rporation (if known)	
06, Florida Statute n:	s, this <i>Florida Not For Profit Co</i>	rporation adopts the following
e of the corporati	on:	
		The new
ie word "corporat i <mark>e name</mark> .	ion" or "incorporated" or the ab	breviation "Corp." or "Inc."
annlicable:	N/A	
EET ADDRESS)		
ble: FFICE BOX)	N/A	
<u></u>		
		
		name of the
	ddress:	
N/A		
	(Florida street address)	
/Cibil	, Flori	
(City)		(Zip Code)
		iums of the position
ей адені. Тані заг	тын жин ини иссерт те өөндиг	ions of the position.
Signature of New	Revistered Agent, if chanving	_
	nent Number of Co 26, Florida Statute 11: 12: 14: 16: 16: 16: 16: 16: 16: 16: 17: 16: 16: 17: 16: 17: 18: 18: 18: 18: 18: 18: 18: 18: 18: 18	the corporation: the word "corporation" or "incorporated" or the able to name. Inpplicable: EET ADDRESS Dite: FICE BOX Or registered office address in Florida, enter the registered office address: N/A (Florida street address) , Florida.

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 <math>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 V SV	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address
1) Change		N/A		•
Add				
2) Change Add				
Remove 3) Change				
Add Remove				
4) Change Add				
Remove				
5) Change			- 	
Remove				
6) Change Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
(Adding)
Upon the dissolution of this organization, assets shall be distributed solely
for one or more exempt purposes within the meaning of Section 501(c)(3)
of the Internal Revenue Code, or corresponding section of any future federal tax code,
or shall be distributed to the federal government, or to a state or local government,
for a public purpose.

The date of each amendment(s) adoption:	10/3/2014	SLUNLTARY STATE if other than the
date this document was signed.	,	SLCHLIAN OF CORPORATIONS
Effective date if applicable: 10/31	2014	file data 1, NOV 12 124 3: 09
(no more	than 90 days after amendment	file date), NOV 12
Adoption of Amendment(s) (CHECH		
The amendment(s) was/were adopted by the me was/were sufficient for approval.	embers and the number of votes	cast for the amendment(s)
There are no members or members entitled to v adopted by the board of directors.	ote on the amendment(s). The	amendment(s) was/were
,		1
Dated 10/31/14		
Signature		
(By the chairman or vice chair	irman of the board, president or n incorporator – if in the hands ary by that fiduciary)	
	JAS	
(Typed or printe	ed name of person signing)	1
(Title	of person signing)	