Mannagos

		1
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
(D.	rainaga Entitu Nas)
(BL	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		:

Office Use Only



300256602493

02/13/14--01020--015 **35.00

SEGRETANCE OF CTATE

FEB 14 2014 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

•		
NAME OF CORPORATION: Ministry of	Hope Peru, Inc.	
DOCUMENT NUMBER: N12000090		
The enclosed Articles of Amendment and fee are submitted		
Please return all correspondence concerning this matter to	the following:	
Debohra Seder, Registere	ed Agent	
(Na	ame of Contact Person)	
Seder & Associate, CPA, I	LLC	
	(Firm/ Company)	
954 Fay Blvd.		
	(Address)	
Cocoa, FL 32927		
(Ci	ty/ State and Zip Code)	
debbie@sedgoldcp	a.com	
E-mail address: (to be used for	future annual report notification)	··
For further information concerning this matter, please call	:	
Debohra Seder	_{at} (321)305-69	920
(Name of Contact Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for the following amount made payab	le to the Florida Department of State:	
(.	S43.75 Filing Fee & Certified Copy Additional copy is enclosed) S52.50 Filing Certificate of Certified Copy (Additional Copy is Enclosed)	Status Dy
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 Of Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

#TLED:
14 FEB 13 PX 4:53

Ministry of Hope Peru, Inc.		SECREPART OF STATE
(Name of Corporation as currently filed with	h the Florida Dept. of State)	THE REPORT OF THE PROPERTY OF
N12000009065		
(Document Num	ber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation:	da Statutes, this Florida Not F	for Profit Corporation adopts the following
A. If amending name, enter the new name of the c	corporation:	
N/A		The new
name must be distinguishable and contain the word ' "Company" or "Co." may not be used in the name.	"corporution" or "incorporate	ed" or the abbreviation "Corp." or "Inc."
	. N/A	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD	<u>le:</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	o_{X} N/A	
1		
D. If amending the registered agent and/or register	ered office address in Florida	a, enter the name of the
new registered agent and/or the new registered		<u> </u>
Name of New Registered Agent: N/A		
	(Florida street address)	
New Registered Office Address;	,	
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Re	gistered Agent:	
I hereby accept the appointment as registered agent.		ot the obligations of the position.
Signature	e of New Registered Agent, if c	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 \underline{X} Char \underline{X} Rem \underline{X} Add	nge ove	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	<u>nes</u>	
Type of (Check (Action One)	<u>Title</u>		Name	<u>Addres</u> s
1)	Change		_	N/A	
	_ Add				
	Remove				
2)	Change				
			 -		
	Remove				
	_ Change		_		
	Add				
	Remove				·
4)	Change				
	Add				
	Remove				
5)	Change		_		
	Add				
	Remove				
6)	Change		_		
	Add				
	Remove				

E.	If amending or adding additional Art	icles, enter change(s) here
	(attach additional sheets, if necessary).	(Be specific)

	of each amendment(s) ado ocument was signed.	ption: February 11, 2014	, if other than the
	date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
Adoption	of Amendment(s)	(<u>CHECK ONE</u>)	
	mendment(s) was/were ado vere sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)	
	e are no members or membe ted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/were s.	
	Dated Februar	y 11, 2014	•
	Signature	Lapla	
	(By the chairm have not been	an or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
	Cindy Lope	Z	
	(7	Typed or printed name of person signing)	
	President		
	· · · · · · · · · · · · · · · · · · ·	(Title of person signing)	