

N120000009476

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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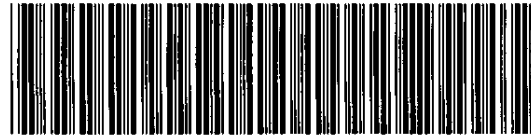
(Business Entity Name)

(Document Number)

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Articles of
Correction

10/12/12--01012--025 **43.75

FILED
2012 OCT 12 PM 4:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/15/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Iglesia El Divino Redentor inc
Name of Corporation

DOCUMENT NUMBER: N12000009476

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melia Mendoza

Name of Contact Person

Iglesia El Divino Redentor Inc

Firm/Company

4526 SE Nimrod Lane

Address

Stuart, FL 34997

City/State and Zip Code

iglesdivinoredentor@gmail.com

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

For further information concerning this matter, please call:

Melia Mendoza

Name of Contact Person

at (772) 631-2902

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35.00 Filing Fee

☒ \$43.75 Filing Fee & Certificate of Status

☐ \$43.75 Filing Fee & Certified Copy

☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

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 CORRECTION

for

FILED

Iglesia El Divino Redentor inc 2012 OCT 12 PM 4: 56

Name of Corporation as currently filed with the Florida Dept. of State

N12000009476

Document Number (if known)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

These articles of correction correct Articles of Incorporation,
(Document Type Being Corrected)

filed with the Department of State on October 02, 2012.
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Melia Mendoza Title:VP

Francisco Mendez Cruz Title:VP

Catarina Juan Mendoza Title:VP

Correct the inaccuracy, incorrect statement, or defect:

Melia Mendoza Title: P

Francisco Mendez Cruz Title: VP

Catarina Juan Mendoza Title: SR

Melia Mendoza

(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Melia Mendoza

(Typed or printed name of person signing)

president officer director

(Title of person signing)

Filing Fee: \$35.00