N12000009757

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
. Special Instructions to Filing Officer:





800245811938

03/20/13--01013--010 **35.08



Append. 03/27/13 De

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ASHLEY E	ESTRADA M	IINISTRIES, INC.
DOCUMENT NUMBER: N12000009	757	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
ASHL	LEY ESTRA	NDA
	(Name of Contact Person)
ASHLEY ES	TRADA MIN	NISTRIES, INC
	(Firm/ Company)	
533 BR	OMLEY CC	URT
	(Address)	
KISSIM	MEE, FL. 3	34758
	(City/ State and Zip Code	2)
ASHLEYCESTRADA@GMAIL.COM		
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
ASHLEY ESTRADA	_ _{at (} 407	288-0138 de & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida Depa	rtment of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & 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)
Mailing Address	Street	Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



(Name of Corporation as currently filed with the Florida Dept. of State) N1200009757

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.19 amendment(s) to its Articles of Incorporation	006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts on:	the following
A. If amending name, enter the new nar	ne of the corporation:	424
name must be distinguishable and contain "Company" or "Co." may not be used in	the word "corporation" or "incorporated" or the abbreviation "Cor	The new rp." or "Inc."
B. Enter new principal office address, if (Principal office address MUST BE A ST		
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O	able: OFFICE BOX)	
new registered agent and/or the new	Nor registered office address in Florida, enter the name of the registered office address; ALWYN MORGAN, ESQ.	
Name of New Registered Agent:	801 W SR 436, STE 2035, ALTAMONTE SPRINGS, FL. 32714	
New Registered Office Address:	(Florida street address)	
	PUTAMONIE SPRINGS, Florida 32.1.1. (City) (Zip Code)	4
	ranging Registered Agent: ared agent. I am familiar with and accept the obligations of the position of the po	ion.

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>V</u> <u>M</u> i	hn Doe ike Jones Illy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) Change	RA	KEITH ODOM	TECHCHURCH INC
Add			1600 33RD STREET
X			STE 114, ORLANDO, FL. 32839
2) Change			
Add			
Remove			
3) Change			_
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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

ARTICLE NINE

·-
UPON DISSOLUTION OF THE CORPORATION, THE BOARD OF
DIRECTORS SHALL, AFTER PAYING OR MAKING PROVISION FOR THE
PAYMENT OF ALL OF THE LIABILITIES OF THE CORPORATION,
DISPOSE OF ALL OF THE ASSETS OF THE CORPORATION EX-
CLUSIVELY FOR THE PURPOSE OF THE CORPORATION IN SUCH MANNER,
OR TO SUCH ORGANIZATION ORGANIZED AND OPERATED EXCLUSIVELY
FOR CHARITABLE, EDUCATIONAL, RELIGIOUS, OR SCIENTIFIC PURPOSES AS
SHALL AT THE TIME QUALIFY AS AN EXEMPT ORGANIZATION
OR ORGANIZATIONS UNDER SECTION 501 (C) (3) OF THE
INTERNAL REVENUE CODE OF 1954 (OR THE CORRESPONDING
PROVISION OF ANY FUTURE UNITED STATES
INTERNAL REVENUE LAW), AS THE BOARD OF DIRECTORS
SHALL DETERMINE. ANY SUCH ASSETS NOT
SO DISPOSED OF SHALL BE DISPOSED OF BY THE DISTRICT COURT OF THE
OSCEOLA COUNTY EXCLUSIVELY FOR SUCH PURPOSES OR TO SUCH
ORGANIZATION OR ORGANIZATIONS, AS SAID COURT SHALL DETERMINE,
WHICH ARE ORGANIZED AND ORGANIZED AND OPERATED
EXCLUSIVELY FOR SUCH PURPOSES.

The date of each amendment(s) adoption: UZ/ 19/ZU 13				
	(no more than 90 days after amendment file date)			
Ade	option of Amendment(s) (<u>CHECK ONE</u>)			
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.			
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.			
	Dated O2/19/2013 Signature all a Carried			
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)			
	ASHLEY ESTRADA			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			