12000011666

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: FULL LIFE CHURCH CORP.
DOCUMENT NUMBER: N12000011666
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Pedro Felipe Villegas Name of Contact Person
Full life Church Firm/Company
1515 NW 167 Street Sutc 200
Miami Gardens Fl 33167 City/ State and Zip Code
Prillegas @ Full I feministry. org. E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please eall:
Pedro Feli Re Villegus at (1786) 486 4121 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certificate Oppy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FULL LIFE CHURCH CORP (Name of Corporation as currently filed with the Florida Dept. of State)

N120000116	66
	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
NIA	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NA
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	NIA
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address Name of New Registered Agent N A	
(Florida M	reet address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	ti with and accept the obligations of the position. S

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)

L'emperator

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.

X Change	<u>PT</u> Jo	ohn Doe	
X Remove	<u>V</u> <u>M</u>	like Jones	
X Add	<u>sv</u> <u>s</u> :	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>S</u> _	Angie Coronado	10230 SW 4th Ct
.X_ Add			AP+ 406
Remove			Pembroke Pines, FL 33025
2) Change	<u>s</u> _	Jose Wis Betancourt	3300 NE 192 Street
X Add			Ap+ 111
Remove			Aventura, FL 33180
3) Change	 		
Add			
Remove			
4) Change		<u></u>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

<u>If amending or a</u> Attach <i>additiona</i>	dding additional Ar sheets, if necessary)	ticles, enter change(s). (Be specific)	s) here:			
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f an a <u>mendm</u> en	t provides for an ex	change, reclassificati	on, or cancellatio	n of issued shares	<u>.</u>	
(if not appli	mplementing the an cable, indicate N/A)	nendment if not conta	imed in the amen	<u>dment (tself:</u>		
		NA		<u>.</u>		
			<u> </u>			
						
		··				

The date of each amendment(s) adoptio	n:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	September 19th 2018	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block of document's effective date on the Departm	does not meet the applicable statutory filing requirements, this date ent of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficien	by the shareholders. The number of votes cast for the amendment(s) at for approval.	
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	,
"The number of votes east for the	e amendment(s) was/were sufficient for approval	
hy	(voting group)	
	(voting group)	
The amendment(s) was/were adopted baction was not required.	by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted baction was not required.	by the incorporators without shareholder action and shareholder	
Dated_Septembe	20th 2018	
	20th 2018 PAD	
Signature	<u> </u>	
	r, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court	
•	duciary by that fiduciary)	
	Pedro Felipe Villegal	
	(Typed or printed name of person signing)	
	President.	
	(Title of person signing)	