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| (Re | equestor's Name) | |
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| Certified Copies | Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPORATION: Iglesia Cristiana Proyecto De Vie |
|--|
| DOCUMENT NUMBER: ~ ~ 13 0000 1794 |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Farah Cruz |
| (Name of Contact Person) |
| Fail Safe Accounting LLC (Firm/Company) |
| (Firm/ Company) |
| 20 5. Rose Aue suite 4 |
| (Address) |
| xi = simmon El 34741 |
| Kissimme FL 34741 (City/State and Zip Code) |
| |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| (Name of Contact Person) at C407) 201-7988 (Area Code) (Daytime Telephone Number) |
| (Name of Contact Person) at (Area Code) (Daytime Telephone Number) |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |
| \$35 Filing Fee |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building |

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

rporation Olyish Files & Company of the

Page 1 of 4

Signature of New Registered Agent, if changing

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 | | Doe Jones Smith | |
|----------------------------------|--------------------------|-----------------------|---|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| Change Add Remove | ? | Miranda, Henri | y 301 Florida Parkway Kissimmee FL 34743 |
| 2) Change Add Remove | <u> </u> | Comacho, Courk | Vissimmo FL 34743 |
| 3) Change Add Remove | 5_ | Alvarez, Ley | Q V. 301 Florida Parkway kissimmee FL 3474 |
| 4) Change Add Remove | $\overline{\mathcal{D}}$ | Peyes, Rere | 301 Florida Parkway Lissimmee FL 34743 |
| 5) Change Add Remove | _D_ | Rosario, Josefi | xissimme FL 34743 |
| 6) Change Add Remove | | | |
| | | Page 2 of 4 | |

| E. If amending or adding additional Articles, enter change(s) here: | | | | | | |
|---|---------------------------------------|---------------|----------------|--|---------------|--|
| (attach additional sh | eets, if necessary). | (Be specific) | | | | |
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| The date of each amendment(s) a date this document was signed. | doption: | | | f(t) = f(t), if other than the |
|---|--|--|---------------------|--------------------------------|
| Effective date if applicable: | 11-16- | 2015 | | DIVISION OF SOME |
| | | han 90 days after amendm | ent file date) | 15 NOV 23 AM II. 15 |
| Note: If the date inserted in this blodocument's effective date on the Do | | | ing requirements | - 5010:16 |
| Adoption of Amendment(s) | (CHECK | ONE) | | |
| The amendment(s) was/were a was/were sufficient for approv | | nbers and the number of v | otes cast for the a | nmendment(s) |
| There are no members or mem adopted by the board of direct | | te on the amendment(s). | Γhe amendment(s | s) was/were |
| Dated | 11-16- | 15 | | |
| Signature | All parties and the second sec | | 1, 1 | |
| have not be | en selected, by an | man of the board, presider incorporator – if in the ha ry by that fiduciary) | | |
| + | FNRY | MIRANDA | PALENC | ia. |
| | (T | yped or printed name of p | erson signing) | |
| | Passing | | | |

(Title of person signing)