N1300000 2483

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Sumo

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	Springs of Living Wa	ater Church			
DOCUMENT NUMBER:	N13000002483				
The enclosed Articles of Am	endment and fee are subm	itted for filing.		-	
Please return all corresponde	nce concerning this matter	to the following:			
Jean Claude Mora					
		Name of Contact Pe	erson)		
SLW					
		(Firm/ Company	v)	 	
1570 NE 191st Street #42	9	(**************************************	,		
		(Address)			
Miami, FL 33179					
	((City/ State and Zip	Code)		
slwchurch@gmail.com					00 00
E	-mail address: (to be used	for future annual rep	ort notificati	on)	
For further information conc	eming this matter, please o	call:			
Jean C. Mora		at	917	364-7846	18 001 25 MM 11: 38 Number)
	(Name of Contact Person)		(Area Code) (Daytime Telephone	Number) 00 15
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida	Department o	of State:	\wp
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Cer is Cer (Ad	.50 Filing Fee dificate of Status dified Copy ditional Copy is closed)	

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 Amendment Articles of Incorporation σf

The state of the s Springs of Living Water Church (Name of Corporation as currently filed with the Florida Dept. of State) N13000002483 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: . Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 Doc 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>Mil</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	<u>D</u>	Melanie Prada	
Add			
X Remove			
2) Change	D	Odalis Quinones	475 Ali Baba Ave. #2
XAđd			Opa Locka, FL 33054
Remove			
3) Change			·
Add			
Remove			
4) Change			· <u></u>
Add			
Remove			
f. Cl			
5) Change	 -		
Add Remove			
Kemove			
(i) Change			
Add			
Remove			

altach additional si	ieets, if necessary	r). (Be specifi	ic)				
			 				
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	n/a ÷	
The date of each amendment(s) ado	otion:, if other than the	ıe
date this document was signed.		
n/a		
Effective date if applicable:		_
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depa	does not meet the applicable statutory filing requirements, this date will not be listed as the rument of State's records.	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado was/were sufficient for approval.	oted by the members and the number of votes cast for the amendment(s)	
There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/were	
Dated	-7-18	
Signature		,
have not beer	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)	
	Sean Caude Mola	
	(Typed or printed name of person signing)	
	(Title of person signing)	
	(Title of person signing)	