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TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ios Emanuel of Stuart Inc			
N13000004496 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee	are submitted for filing.			
Please return all correspondence concerning the	nis matter to the following:			
Macario LTax				
	(Name of Contact			
Iglesia De Dios Emanuel of Stuart Inc				
	(Firm ^e Compa	ny)		
4754 SE Grouper Ave.				
	(Address)			-
Stuart, F1, 34997				
	(City/ State and Zi	p Code)	<u> </u>	
Isaiastaxid icloud.com				
E-mail address: (to	be used for future annual r	eport notificat	ion)	
For further information concerning this matter	, please call:			
Macario l'Tax			634-6262	
(Name of Contact	Person)	(Area Code	e) (Daytime Felephone Number)	
Enclosed is a check for the following amount	made payable to the Florid	a Department	of State;	
☐ \$35 Filing Fee ☐ \$43.75 Filing Certificate of		Cer 7 is — Cer (Ad	.50 Filing Fee tificate of Status tified Copy Iditional Copy is closed)	
Mailing Address Amendment Section		i <mark>treet Addres</mark> Vinendment Sc		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations The Centre of Tailahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Ft. 32303

Articles of Amendment to Articles of Incorporation of

Iglesia De Dios Emanuel of Stuart Inc.

(Name of Corporation as currently filed with the Flor	ida Dept. of State)	
N13000004496		
(Document N	lumber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida S amendment(s) to its Articles of Incorporation:	datutes, this Florida Not Fe	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	ooration:	
name must be distinguishable and contain the word "cor" "Company" or "Co." may not be used in the name	pocation" or "incorporate:	The new to or the abbreviation * Corp * or **Inc.**
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.)	<u>ESS</u>)	· N
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		,
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	office address in Florida, ice address:	enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(F.I.	rada street daaress
	(City)	. 4 Iorida Oup Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	ered Agent:	
	Signature of New Registe	red 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 + Charman or Ceek, 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	PT John De V Mike Je SV Sally St	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>T</u>	Gutierrez, Francisco, Sr.	4754 SE Groupe: Ave Shart, FL 34997
Remove			
2) Change Add	<u>S</u>	Gutierrez, Walter, Sr.	4754 SE Grouper Ave. Strart, FL 34997
X			
4) Change Add			
Remove			
5) Change Add		***************************************	
Remove			
6) Change Add		13.	
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
			····

	
The date of each amendment) adoption:
date this document was signed	
Effective date if applicable:	2/14/2020
	(no more than 90 days after amendment file date)
Note: If the date inserted in the document's effective date on t	block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/w was/were sufficient for ap	e adopted by the members and the number of votes cast for the amendment(s) royal.

adopted by the bi	oard of directors.
Dated	12/14/2020
Signatur	× No 922
	(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)
	Macario I Tax
	(Typed or printed name of person signing)
	President/Pastor
	(Title of person signing)

There are no members or (numbers entitled to vote on the amendment(s). The amendment(s) was were