N1300000 9994

Sonia Marrero P.O.BOX 422 Belleview, FL. 34421
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
OD into on pg 2 was up date on Americanent fiew 5/13/15. Ohis is Name Change only.

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SECRETARY OF STATE TALLAHASSEE, FLORID. 40

T CANNON:



June 8, 2015

SONIA MARRERO P.O. BOX 422 BELLEVIEW, FL 34421 US

SUBJECT: IGLESIA PENECOSTA DE JESUCRISTO JEHOVA NISSI, INC.

Ref. Number: N13000009994

We have received your document for IGLESIA PENECOSTA DE JESUCRISTO JEHOVA NISSI, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This document was previously filed on May 13, 2015.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina D Cannon Regulatory Specialist II

Letter Number: 515A00011932

Articles of Amendment

· 10

Articles of Incorporation of

	~ Nissi, Inc	•	
(Name of Corporation as	currently filed with the Florid	Dept. of State)	
N13000009994			
(Document	Number of Corporation (if kno-	wn)	
ursuant to the provisions of section 617.1006, Florida mendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For I	Profit Corporation adopts the	: following
. If amending name, enter the new name of the cou	rporation:		•
Eglesia Penterostal De Jesu	cointa Teballo	Vissi tor.	The nam
ame must be distinguishable and contain the word " or Company" or "Co." may not be used in the name	orporation" or "incorporated"	or the aboreviation * Corp."	or "inc."
Enter new principal office address, if applicable:			
rincipal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>		
			<u>- </u>
	4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.		
If amending the registered agent and/or registers	ed office address in Florida, en	ter the name of the	JUN 22
new registered agent and/or the new registered of	mice address:		22
Name of New Registered Agent:			
			<u>_</u>
New Registered Office Address:	(Flori	da street address)	04 :01 H.
Men negalited Office Main usa.			_
 -	(City)	, Florida (Zip Code)	
	(City)	(Zip Code)	
w Registered Agent's Signature, if changing Regi	stered Agent:	- the mine of the modifies	
hereby accept the appointment as registered agent. I	am familiar with and accept the	e obligations of the position.	
	Signature of New Registers	ed Agent if changing	
	Dignature of their Negister	a rigemi y enanging	

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>	Name	Address
1) Change	T	Castillo, Hilda	P.O. Box 422 Belleview, FL.34421 Wa
Remove 2) Change Add	エ	Gustavo Marrero	P.O. Box 422 Belleview, FL. 34421
Remove 3) Change Add			
Remove 4) Change Add Remove			FILED STATE LLAHASSEE, FLORIDA
5) Change Add Remove			
6) Change Add Remove			

amending or adding additional Articles, enter change(s) liere: ttach additional sheets, if necessary). (Be specific)		
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Page 3 of 4

The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable: 5/25/15 (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	e listed as the
Adoption of Amendment(s) (CHECK ONE)	
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 5/25/15 Signature Marien	
(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)	-
Sonia Marrero	
(Typed or printed name of person signing)	15 AE
Resident (Title of person signing)	FILED STATE OF STATE
	OR PA

* 1 K 1