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COVER LETTER

TO: Amendment Section , Division of Corporations

| ; Iglesia Bib NAME OF CORPORATION: | ica Harvest Miami West |
|-------------------------------------------------|--------------------------------------------------|
| N13000010539 DOCUMENT NUMBER: | |
| The enclosed Articles of Amendment and fe | are submitted for filing. |
| Please return all correspondence concerning | his matter to the following: |
| Israel Iglesias | · · |
| | (Name of Contact Person) |
| | |
| | (Firm/ Company) |
| 7830 NW178TH ST | |
| | (Address) |
| HIALEAH, FL 33015 | |
| | (City/ State and Zip Code) |
| FINANZAS@IGLESIAVERTICALMIAMI | COM |
| E-mail address: (1 | be used for future annual report notification) |
| For further information concerning this matter | r, please call: |
| ISRAEL IGLESIAS | (305) (527-2041) |
| (Name of Conta | |
| Enclosed is a check for the following amoun | made payable to the Florida Department of State: |
| \$35 Filing Fee \$43.75 Filing Certificate of | |
| Mailing Address Amendment Section | Street Address Amendment Section |

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

| (Name of Corporation as curren | tly filed with the Florida Der | ot. of Black PR 17 P 7 23 |
|------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------|
| N13000010539 | | |
| (Document Numb | er of Corporation (if known) | SECRETARY OF STATE |
| Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation: | s, this <i>Florida Not For Profit</i> | * * * * * * * * * * * * * * * * * * * * |
| A. If amending name, enter the new name of the corporati | on: | |
| IGLESIA VERTICAL MIAMI, INC | | The new |
| name must be distinguishable and contain the word "corporal" "Company" or "Co." may not be used in the name. | ion" or "incorporated" or the | |
| | 7830 NW 178TH ST | |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | HIALEAH, FL 33015 | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 7830 NW 178TH ST | |
| | HIALEAH, FL 33015 | |
| | | |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a | | he name of the |
| Name of New Registered Agent: | | |
| New Registered Office Address: | (Florida stre | ret address) |
| | | , Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai | | igations of the position. |
| | enature of New Registered Ag | ent 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: XChange X Remove X Add | \underline{V} \underline{Mi} | nn Doe ke Jones ly Smith | |
|---------------------------------|----------------------------------|--------------------------------|-------------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | VP | JASON FEVIG | 11173 GRIFFING BLVD |
| Add | | | BISCAYNE PARK, FL 33161 |
| X Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| additional sheets, if necessary). (Be specific) |
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| The | e date of each amendment(s) adoption: | , if other than th |
|---------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| | e this document was signed. | |
| Effe | ective date if applicable: | |
| | (no more than 90 days after amendment file date) | |
| | te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will cument's effective date on the Department of State's records. | l not be listed as the |
| Ado | option of Amendment(s) (<u>CHECK ONE</u>) | |
| _ _/ | The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval. | |
| 섮 | 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 4/12/2017 | |
| | Signature (By the 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) | |
| | Tsrael Islesias (Typed or printed name of person signing) | |
| | | |
| | President | |
| | (Title of person signing) | |