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| Special Instructions to Filing Officer: |
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SECRETARY OF STATE

APPROVED



COVER LETTER

TO: Amendment Section **Division of Corporations**

| NAME OF CORPORATION: Iglesia de Dios de Eloise |
|---|
| DOCUMENT NUMBER: N1400000572 |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Elvin Gotay (Name of Contact Person) |
| Iglesia de Dros de Floise (Firm/Company) |
| P.O. Box 7498 (Address) |
| Winter Haven, FL 33883 (City/ State and Zip Code) |
| Vidalifechurch fl@ gmail.com E-mail address: (to be used for future annual report potification) |
| For further information concerning this matter, please call: Mariam Gotay at (352) 777-2478 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount made payable to the Florida Department of State: |
| \$35 Filing Fee U\$43.75 Filing Fee & U\$43.75 Filing Fee & Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status (Additional Copy is Enclosed) |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations |

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| Iglesia de Dios de Eloise |
|---|
| (Name of Corporation as currently filed with the Florida Dept. of State) |
| N14000000572 |
| (Document Number of Corporation (if known) |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation: |
| A. If amending name, enter the new name of the corporation: |
| The new |
| 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. |
| B. Enter new principal office address, if applicable: 402 Snively Ave |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Winter Haven, FC |
| |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) P.O. Box 7498 |
| Winter Haven, FL |
| 33883 |
| 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: Elvin Gotay |
| 402 Snively Ave Winter Haven, FL 33880 (Florida street address) |
| New Registered Office Address: |
| Winter Haven, Florida 33880 (City), Florida (Zip Code of the Code |
| New Registered Agent's Signature, if changing Registered Agent: |
| TAVINSOITA EET P EET P |
| Signature of New Registered Agent, if changing |
| Page 1 of 4 |

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 | PT John D Y Mike Jo SV Sally S | <u>ones</u> | |
|----------------------------------|--------------------------------------|---------------------------|--|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| !) Change Add Remove | P | Jorge Guadalupe | P.O. Box 7498 Winter Haven, FL 33883 |
| 2) Change Add | P | Elvin Gotay | P.O. Box 7498 Winter Haven, FC 33883 |
| Remove 3) Change Add Remove | VP | Ruth Guadalupe | PO.BOX 7498 WH, FL 33883 |
| 4) Change Add Remove | <u>VP</u> | Mariam Gotay | P.O. Box 7498 WH, FL 33883 |
| 5) X Change Add Remove | <u>D</u> | Lizardo Villafañe Vega | P.O.Box 7498 Winter Haven, FC 33883 |
| 6) Change Add Remove | TD | Emeterio Chavarna | P.O. Box 7498 Winter Haven, FZ 33883 |
| Kemove | | Page 2 of 4 | |

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| If amending the Officers and/or | Directors: enter the title a | nd name of each offic | cer/director being remov | ed and title, name, and |
| The manufacture of the state of | | | | Table and Mills (1) |
| address of each Officer and/or D | irector 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.

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| Example: X Change X Remove X Add | PT John L V Mike J SV Sally S | <u>lones</u> | | |
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| 4) Change | *** ** ** **************************** | Smith | | A STATE OF THE STA |
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| 5)Change Remove | | The second second | The state of the s | |
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| tach addi | g or adding tional sheets | , if necessa | ary). (Be | specific) | | | | |
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| | date of each amendment(s) adoption: July 13, 2014 this document was signed. | , if other than the |
|------|--|---------------------|
| Effe | ective date if applicable: July 13, 2014 | _ |
| ١ | (no more than 90 days after amendment file date) | |
| Ada | option 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 81514 | |
| | Signature # 1 SOTH 5.3 | |
| | (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) | |
| | Elvin Gotay | |
| | (Typed or printed name) of person signing) | |
| | President and Paston | |
| | (Title of person signing) | |