## N14000003562

(Re	equestor's Name)	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: IGLESIA EVANGE	LICA NUEVO RENAC	CER CORP	
DOCUMENT NUMBER: N14000003562			
The enclosed Articles of Amendment and fee are subm			<del>-</del>
Please return all correspondence concerning this matte	r to the following:		
VIDAL ESCALANTE MORALES			
	(Name of Contact Person	on)	<del>-</del> ··
	(Firm/ Company)		
13729 - 68TH ST			
	(Address)	<u>.</u>	<u> </u>
LIVE OAK, FL 32060			
	(City/ State and Zip Co	de)	<del></del>
IGLECIANUEVORENACER2@GMAIL.COM			
E-mail address: (to be used	for future annual report	t notificatio	n)
For further information concerning this matter, please	call:		
MARISOL M BROWN	at	36	2093180
(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the following amount made par	yable to the Florida Dep	partment of	State:
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amen Divisi	t Address dment Sect on of Corpo Centre of T	

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

IGLESIA EVANGELICA NUEVO RENACER CORP

The state of the s	Q1/111				
(Name of Corporation as currently filed with the	he Florida I	Dept. of State)			
N14000003562	•	<del></del> -			
(Доси	ment Numb	er of Corporation (i	if known)	<del>_</del> - <del>,_</del>	
Pursuant to the provisions of section 617.1006, Fl amendment(s) to its Articles of Incorporation:	orida Statute	es, this <i>Florida Not</i>	For Profit Corp	oration adopts the	followi
A. If amending name, enter the new name of the	he corporat	ion;			
N/A 					The ne
name must be distinguishable and contain the wor "Company" or "Co." may not be used in the nan	d "corporal 1e.	tion" or "incorpore	ited" or the abbr	reviation "Corp."	or "Inc.
B. Enter new principal office address, if applic (Principal office address <u>MUST BE A STREET</u> )	able:	N/A	_		
interpretation in the	<u> ADDRESS</u> ,	· <del></del>		<u>_</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	* <i>BOX</i> )	N/A			
					_
D. If amending the registered agent and/or reg	istered offic	e address in Flaviu	da antor the ma-	ma afab	
new registered agent and/or the new register	red office a	ddress:	ua, enter the na	me of the	
Name of New Registered Agent:	VIDAL E	SCALANTE MOR.	ALES		
	13729 681	'H ST			
Man Parsistand Office 111		-	(Florida street addre	25.5)	
New Registered Office Address		,			
	LIVE OAI			, Florida <u>32060</u>	_
		(City)		(Zip Code)	
ew Registered Agent's Signature, if changing	Registered .	Agent:			
hereby accept the appointment as registered agen	it. I am fan	tiliar with and acce	pt the obligation	s of the position.	
<u></u>	x Jiho				21 ×
2	Sig	nature of New Reg	istered Agent, if c	changing	**************************************
					;;; T.:
					<b>6</b> 5

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:
and address of each Officer and/or Director Deng 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 = Chie
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           V         Mike J           SV         Sally S	<u>ones</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
i) Change Add Remove	<u>P</u>	CRISTOBAL ORELLANA	13729 68TH ST LIVE OAK, FL 32060
2) Change Add	<u>P</u>	VIDAL ESCALANTE MORALES	13729 68TH ST LIVE OAK, FL 32060
Remove 3) Remove Add Remove	TRE	Yidal Escalante Obrabs	13729 1828 Luc Odle, FL 32060
4) Change Add	TRE	Sould Braud DIAZ	13729 68 \$ St Live DAL FL 92060
Remove  5) Change Add			
Remove 6) Change Add			
E. If amending or addin (attach additional shee	ng additional Artius, if necessary).	icles, enter change(s) here: (Be specific)	
<i>.</i>	<u> </u>		

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The date of each amendment(s) adoption: $04/23/2021$ date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	<del></del> ·

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

	05/19/2021
Dated	
Signatur	X Hard
	(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)
	VIDAL ESCALANTE MORALES
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)