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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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| | To: | | | | |
| | | Division of Cor | rporations | | |
| | | Fax Number | | 180 | |
| 1.0 | | | , , | | |
| | From: | | | | |
| $\ddot{\sim}$ | | Account Name | : LAZARUS COR | PORATE FILING SER | VICE. INC. |
| <u>:</u> | | Account Number | | | |
| | | Phone | : (305)552-59 | 73 | |
| C] | | Fax Number | : (305)675-59 | 144 | |
| C | | | | | |
| | | | | | |
| <u>-</u> - | | | | | e used for future |
| 2020 | ann | ual report maili | ngs. Enter on | ly one email addr | ess please.** |
| • • | Ema | il Address: | | | |
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COR AMND/RESTATE/CORRECT OR O/D RESIGN AUDITORIO VIDA EN FAMILIA DISCIPULOS DE CRISTO INC.

| Certificate of Status | 0 |
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| Certified Copy | 0 |
| Page Count | 05 |
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Corporate Filing Menu

Help

VINSONFAMILYS

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PAGE 02

03/23/2019 04:36 9804395978

Acticles of Amendment Articles of Incorporation of

| AUDITORIO VIDA EN FA | MILIA DISCIPULOS DE CRISTO |) INC. |
|---|--|--|
| Name of Corporation as currently filed with the | Florida Dept. of State) | |
| N 1400000387 I | | |
| (Ducume | nt Number of Corporation (if know | vn) |
| Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation: | da Statutes, this Florida Nat For F | rofit Corporation adepts the following |
| A. If amending name, enter the new name of the | corporation: | |
| | | The new |
| name must be distinguishable and contain the word "Compuny" or "Co." may not be used in the name | "corporation" or "incorporated" | or the abbreviation "Corp." or "Inc." |
| B. Euter new principal office address, if applicat | <u> </u> | |
| (Principal office address MUST BE A STREET A | DORESS) | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: | | ÷ |
| (Mailing address MAY BE A POST OFFICE) | 9 <i>0X</i>) | 1. |
| <u>. </u> | _ | 1. |
| | | |
| | | <u> </u> |
| D. If amending the registered agent and/or registered agent and/or the new register | ed office address: | nter the name of the |
| Name of New Registered Agent: | GUSTAVO ESPINOSA | 4 |
| | 12111 N 58TH ST | |
| | (Flor | ida street oddress) |
| New Revistered Office Address: | | |
| | TEMPLE TERRACE | , Florida 33617 |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen | Registered Agent: It. I am familiar with and accept to Signature of New Registe. | |

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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 I V Mike SV Sally | <u>Jones</u> | | 2828 HAY 2 SEUNLIANAS |
|--|---------------------------------------|--|------------------------------------|--------------------------|
| Type of Action (Check One) | Title | <u>Name</u> | Address | SSEE S |
| l)Chunge | TREA | BRENDA L CORUJO | 12111 N 58TH ST TAMPA, FL 33617 | - 10.5. · |
| x Remove | | | | |
| 2) Change Add | | · · · · · · · · · · · · · · · · · · · | | |
| Remove 3) Remove Add Remove | | | | |
| 4) Change Add | | | | |
| Remove | | | | · · |
| 5) Change Add | | | | |
| Remove | | | | |
| (f) Change Add | | | | |
| Remove | | | | |
| E. If umending or a (attach additional | dding additional sheets, if necessary | Articles, enter chauge(s) here: y). (Be specific) | | |
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LAZARUS CORPORATE VINSONFAMILYS

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| | | | AH 9: |
| | | | #H 9: 35 |
| he date of each amendment(s) adoption: | MAY 21, 2020 | | , if other than th |
| ato this document was signed. [Hective date if applicable: | MAY 21, 2020 | | |

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.

Adoption of Amendment(s)

(CHECK ONE)

The amendment(s) was/were adopted by the mombers and the number of votes east 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.

. . .

1

MAY 21, 2020

Signature 1

(By the engineer 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)

GUSTAVO ESPINOSA

(Typed or printed name of person signing)

PASTOR

(Title of person signing)