

N1400007333

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PICK-UP WAIT MAIL

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TALLAHASSEE, FLORIDA

JAN 03 2019

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 22, 2018

IVETTE LOPEZ
8636 KEY BISCAYNE DRIVE #102
TAMPA, FL 33614

SUBJECT: CENTER OF RESTORATION: JESUS MY SAVIOR, INC.
Ref. Number: N14000007333

We have received your document for CENTER OF RESTORATION: JESUS MY SAVIOR, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Shelia H Young
Regulatory Specialist II

Letter Number: 518A00010675

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SECRETARY
LLAHAS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Center of Restoration : Jesus my Savior, Inc.

DOCUMENT NUMBER: N14000007333

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tvette Lopez
(Name of Contact Person)

(Firm/ Company)

8636 Key Biscayne Dr. #102
(Address)

Tampa, FL 33614
(City/ State and Zip Code)

pastordivylopez@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tvette Lopez at 860-830-1538
(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
 - \$43.75 Filing Fee & Certificate of Status
 - \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
 - \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
- Previously mailed check!

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

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

Articles of Amendment
to
Articles of Incorporation
of

Center of Restoration: Jesus my Savior, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N14000067333

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

House of Restoration - New Jerusalem, Inc. 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:

(Principal office address MUST BE A STREET ADDRESS)

1304 W. Busch Blvd
Tampa, FL 33612

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8636 Key Biscayne Dr. #102
Tampa, FL 33614

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:

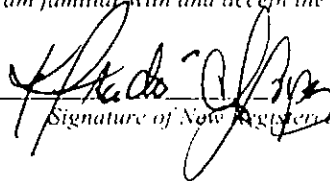
Triste Lopez
5212 Cherry Ave.
(Florida street address)

New Registered Office Address:

Seffner, Florida 33584
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature of New Registered Agent, if changing

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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:

| | | |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u> |
| <input checked="" type="checkbox"/> Remove | <u>V</u> | <u>Mike Jones</u> |
| <input checked="" type="checkbox"/> Add | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|--|--|-------------------------|---|
| 1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>Elder</u> | <u>Lucia Perez</u> | <u>8636 Key Biscayne Sr.</u> <u>#102</u> <u>Tampa, FL 33614</u> |
| 2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>Elder</u> | <u>Marvin Diaz</u> | <u>9104 W. Glens St.</u> <u>Tampa, FL</u> |
| 3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>Board</u> <u>Director</u> | <u>Melody G. Santos</u> | <u>8636 Key Biscayne Sr.</u> <u>#102</u> <u>Tampa, FL 33614</u> |
| 4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>Secretary</u> | <u>Karla Prado</u> | <u>5212 Cherry Ave.</u> <u>Seffner, FL 33584</u> |
| 5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | _____ | _____ | _____ |
| 6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | _____ | _____ | _____ |

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

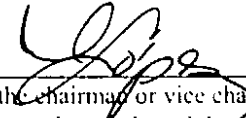
Effective date if applicable: 12/01/2018
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be 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 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 12/14/18

Signature 
(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)

Ivette Lopez
(Typed or printed name of person signing)

SENIOR Pastor
(Title of person signing)