114000009763

(Red	questor's Name)					
(Address)						
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(City	//State/Zip/Phone	· #)				
PICK-UP	☐ WAIT	MAIL				
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(Document Number)						
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2017 APR 12 P 4: 56
SECRETARY OF STATES

APR 1 3 2017

T. LEMIEUX



Division of Corporations Iglesia de Cristo de Dover N 1400000 9763 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$43.75** Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address**

TO: 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 31, 2017

HUMBERTO PALACIOS 3314 SILVER POND DR PLANTCITY, FL 33566

SUBJECT: IGLESIA DE CRISTO DE DOVER, INC

Ref. Number: N14000009763

We have received your document for IGLESIA DE CRISTO DE DOVER, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This is a Non-profit corporation the document you sent in is for a Profit corporation. Please file Non-profit Articles fo Amendment.

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.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 417A00006215

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Articles of Amendment

to
Articles of Incorporation

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(Name of Corporation as curren	o De	the Florid	a Dept. of		- This	imm.	
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N1400000 9				2017 API	1 12	1-	<u>4:</u> 5(
(Document Num	•	•		SECRET	ARY	OF S	TATE
Pursuant to the provisions of section 617.1006, Florida Statut	tes, this <i>Florida</i>	Not For I	Profit Corp	Starboth SLICE	PS E	follo	OURO.
amendment(s) to its Articles of Incorporation:							
A. If amending name, enter the new name of the corporat	tion:				•		
						The	new
name must be distinguishable and contain the word "corpora	ation" or "inco	rporated"	or the abbr	eviation "C	Corp."		
"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	<u> </u>						

C. The same of the			,				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	33	314	Silvi City	c/ Do/	nd	D	r.
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		Q/IT	<u> </u>			<u>ا ر ر</u>	<u> </u>
D. If amending the registered agent and/or registered off	ico address in l	Florida es	nter the mo	me of the			
new registered agent and/or the new registered office	address:	r tot tdat Ci	iter the na	are or the			
Name of New Registered Agent:	lumber	cta	Pala	eois			
Nume of New Negaterea Agent.		<u> </u>	164774				
	2314	DILVE	C/DO/ ida street addr	10 L	<u>)r</u>		
New Registered Office Address:		(1.101.1	IZU 317 CET CALICA	ess <i>)</i>			
	71001 C	·		171 ami da	スコ	350	56
	(City)	119		_, Florida _ (Zip Co	ode)	<u>/</u>	<u> </u>
N. W. data and A. Comercia and A. Comercia	1 44				-		
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	<u>i Agent:</u> imiliar with and	d accept th	e obligation	ns of the po	sition.		
. 11		1/1/					
White the state of	15 8	The	Oles				
	Signature of Ne	w Register	ed Agent it	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: X.Change X.Remove X.Add		<u>Doe</u> Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	D	Basilio Muroz	3326 Steinbeck Plant City, FL 3356
2) Change Add	D	Humberto Palacios	3314 Silverpord Dr Plant Crty FL 33566
Remove 3) Change Add		·	
Remove 4) Change Add			
Remove 5) Change Add			
Remove Change	************		
Add			

f àmending or adding add utach additional sheets, if i	necessary).	(Be specific)	<u> </u>			
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	ach amendment(s) adoption: _ ment was signed.	110117	, if other than the
	e <u>if applicable</u> :	9 More than 90 days after amendment file d	ate)
	late inserted in this block does n fective date on the Department of	ot meet the applicable statutory filing requi of State's records.	rements, this date will not be listed as the
Adoption of A	Amendment(s)	CHECK ONE)	
	ndment(s) was/were adopted by sufficient for approval.	the members and the number of votes cast	for the amendment(s)
	e no members or members entitle by the board of directors.	ed to vote on the amendment(s). The amen	dment(s) was/were
1	Dated 4 [8]	17 - DD	
:	Signature Music	A Palecies	
	, •	ce chairman of the board, president or othe d, by an incorporator – if in the hands of a r	
		fiduciary by that fiduciary)	ever ter, a assect of
	Ho	mberto Palacios	
		(Typed or printed name of person sign	aing)
		Director	
		(Title of person signing)	