

N14 0000010564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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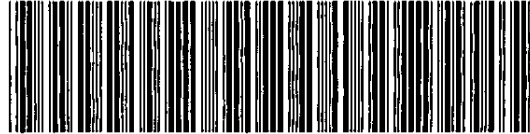
(Business Entity Name)

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TALLAHASSEE, FL 32301

15 JUL -9 AM 9:31

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 24, 2015

ANA SUAREZ  
CONCILIO GUERREROS EN PIES DE GUERRA  
1025 ALBANY AVE  
LEHIGH ACRES, FL 33971

SUBJECT: CONCILIO GUERREROS EN PIES DE GUERRA INTERNACIONAL  
INC.  
Ref. Number: N14000010564

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The incorrect form was submitted. Please complete form pursuant to a Florida Not for Profit Corporation.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair  
Regulatory Specialist II

Letter Number: 915A00013307

RECEIVED

15 JUL -9 PM 4:35

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

Concilio Guerreros en pies de guerra Internacional Inc.

**NAME OF CORPORATION:** \_\_\_\_\_

N14000010564

**DOCUMENT NUMBER:** \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Ana Suarez

\_\_\_\_\_  
(Name of Contact Person)

Concilio Guerreros en pies de Guerra Internacional Inc.

\_\_\_\_\_  
(Firm/ Company)

356 Delaware Rd

\_\_\_\_\_  
(Address)

Lehigh Acres FL 33936

\_\_\_\_\_  
(City/ State and Zip Code)

suareze16@yahoo.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ana Suarez

774

488-4685

at \_\_\_\_\_

\_\_\_\_\_  
(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:

- |                                          |                                                                                   |                                                                                                     |                                                                                                                            |
|------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

**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

FILED  
15 JUL -9 AM 9:31  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

Concilio Guerreros En Pies de Guerra Internacional Inc.

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

(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:**

*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**)

**C. Enter new mailing address, if applicable:**  
(Mailing address **MAY BE A POST OFFICE BOX**)

**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: Jonathan Rodriguez  
8256 Matanzas Rd.  
(Florida street address)

New Registered Office Address:  
Fort Myers FL 33967  
(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

**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	<u>RA</u>	<u>Jose L. Cruz Sr</u>	<u>10th St 1602 Ocala Fl 33471</u>
<input type="checkbox"/> Add			
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>O</u>	<u>Angel Rivera Sr</u>	<u>2810 52 Ave</u>
<input type="checkbox"/> Add			<u>NE. Naples Fl 34120</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>RA</u>	<u>Jonathan Rodriguez Sr</u>	<u>8256 Matanza Rd</u>
<input checked="" type="checkbox"/> Add			<u>Fort Myers Fl 33967</u>
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>O</u>	<u>Gleysi Narvaez</u>	<u>5434 Carlton St.</u>
<input checked="" type="checkbox"/> Add			<u>Naples Fl 34113</u>
<input type="checkbox"/> Remove			
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)

Currently Jose L. Cruz Sr is listed as the Registered Agent and Angel Rivera Sr is Listed under title Officer.

there is a change Jose L. Crus Sr and Angel Rivera Sr they leaves our corporation.

Jonathan Rodriguez is named as Registered Agent and Gleysi Narvaez as Named as Officer as Add.