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2021 FEB -3 PH 12: 42 SECRETARY OF STATE

3/27/21

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATI | ON: | EL MIAMI, INC. | | |
|------------------------------|---|---|----------------------------------|--|
| DOCUMENT NUMBER: | N14000011572 | | | |
| The enclosed Articles of Ar | mendment and fee are sub | omitted for filing. | | |
| Please return all correspond | lence concerning this mat | ter to the following: | | |
| Ariel Sagre, Esq. | | | | |
| | | (Name of Contact | Person) | |
| Sagre Law Firm, P.A. | | | | |
| | | (Firm/ Compa | ny) | |
| 5201 Blue Lagoon Drive, S | Suite 892 | | | |
| | | (Address) | | |
| Miami, FL 33126 | | | | |
| | | (City/ State and Zi | Code) | |
| | -mail address: (to be use | d for future annual r | enort notification | 200 |
| For further information con- | | | epost nourrous | , and |
| | cerning this matter, please | can. | | |
| Ariel Sagre | | 8 | 305 it | 266-5999 |
| | (Name of Contact Persor | 1) | (Area Code) | (Daytime Telephone Number) |
| Enclosed is a check for the | following amount made p | ayable to the Florida | Department of | State: |
| ■ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fe Certified Copy (Additional copy enclosed) | Certi is Certi (Add | 60 Filing Fee ficate of Status fied Copy itional Copy is osed) |
| Mailing A | Address ent Section | | treet Address | tion |
| | of Cornorations | = - | inenument sec livision of Com | |

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED

Articles of Amendment to Articles of Incorporation of

2021 FEB -3 PM 12: 42

CALVARY CHAPEL MIAMI, INC.

SECRETARY OF STATE
TALLAMASSES, FIL

| _ | nt Number of Corporation (if known) |
|--|---|
| Pursuant to the provisions of section 617.1006, Florid amendment(s) to its Articles of Incorporation: | da Statutes, this Florida Not For Profit Corporation adopts the following |
| A. If amending name, enter the new name of the c | corporation: |
| none to distinct the later of t | The new corporation or "incorporated" or the abbreviation "Corp." or "Inc." |
| "Company" or "Co." may not be used in the name. | corporation or incorporated or the appreviation Corp. or inc. |
| B. Enter new principal office address, if applicable | e: |
| (Principal office address MUST BE A STREET AD) | |
| do T | |
| | |
| C. Enter new mailing address, if applicable: | |
| (Mailing address <u>MAY BE A POST OFFICE BO</u> | <u> </u> |
| | |
| | |
| D. If amending the registered agent and/or registe | ered office address in Florida, enter the name of the |
| | |
| new registered agent and/or the new registered | |
| new registered agent and/or the new registered Name of New Registered Agent: | |
| | |
| Name of New Registered Agent: | (Florida street address) |
| | (Florida street address) |
| Name of New Registered Agent: | |
| Name of New Registered Agent: | , Florida |
| Name of New Registered Agent: New Registered Office Address: New Registered Office Address: | , Florida |

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 Do Y Mike Jo SY Sally Sn | nes es | |
|--|--|--|--------------------------------------|
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change Add | <u>P, D</u> | Razziel W. Vazquez | 11975 SW 2 Street Miami, FL 33184 |
| Remove 2) Change Add | D | ANDREW HENDRY | P O BOX 55 7023 Miami, FL 33255 |
| x Remove 3) x Change Add Remove | <u>P, D</u> | | 11975 SW 2 Street Miami, FL 33184 |
| 4) Change Add | | | |
| Remove 5) Change Add Remove | | | |
| 6) Change Add | | | |
| E. If amending or adding (attach additional sheet) | e additional Artic | cles, enter change(s) here: (Be specific) | |
| | | | |

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| The date | date of each amendment(s) ac this document was signed. | loption: | , if other than the |
| Effec | tive date <u>if applicable</u> : | | |
| | in applicable. | (no more than 90 days after amendment file date) | |
| Note docui | | ck does not meet the applicable statutory filing requirements, this | |
| | otion of Amendment(s) | (CHECK ONE) | |
| | The amendment(s) was/were acwas/were sufficient for approva | lopted by the members and the number of votes east for the amen | dment(s) |

| Dated | 1/10/21 |
|-----------|--|
| 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) |
| (| other court appointed fiduciary by that fiduciary) Andres E Z Vazquez |
| (| |
| (| Andres E Z Vazquez |