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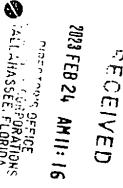


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COVER LETTER

TO: Amendment Section
Division of Corporations

IGLESIA CRISTO MISIONERA PRINCIPE DE PAZ, INC	
N15000000092 OCUMENT NUMBER:	
the enclosed Articles of Amendment and fee are submitted for filing.	
ease return all correspondence concerning this matter to the following:	
AVID FIGUEROA	
(Name of Contact Person)	
/A	
(Firm/ Company)	
O BOX 91783	
(Address)	
AKELAND, FLORIDA 33804	
(City/ State and Zip Code)	
EVDF45@HOTMAIL.COM	
E-mail address: (to be used for future annual report notification)	
or further information concerning this matter, please call:	
AVID FIGUEROA 863 670-0126	
(Name of Contact Person) (Area Code) (Daytime Telephone Number)	
nclosed 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 Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)	

Mailing Address

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

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



Articles of Amendment to Articles of Incorporation of

In ID

2023 FEB 24 AM II: 30

(Name of Corporation as currently filed with the Florida Dept. of State)		SPORFINANCE
		TALLABASSELAF
N15000000092		
(Document Nur	nber of Corporation (if kr	nown)
Pursuant to the provisions of section 617.1006, Florida Stat amendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor CONCILIO DE IGLESIAS DE CRISTO MISIONERA, MI	'ation: SION INTERNACIONAL	, ICM PRINCIPE DE PAZ, INC
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.		
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRES	<u>(Z</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered onew registered agent and/or the new registered office		enter the name of the
Name of New Registered Agent: N/A		
	(Fl	orida street address)
<u>New Registered Office Address</u> : N/A		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		the obligations of the position.
	Signature of New Registo	ered 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: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add		N/A	
Remove			
2) Change Add		N/A	
Remove 3) Change Add Remove		N/A	
4) Change Add		<u>N/A</u>	
Remove 5) Change Add		<u>N/A</u>	
Remove 6) Change Add		N/A	
Remove	ng additional Arti	cles, enter change(s) here:	
(attach additional shee			
N/A	· · · · · · · · · · · · · · · · · · ·		
<u></u>			

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N/A '	
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N/4	
The date of each amendment(s) adoption: N/A	, if other than the
date this document was signed.	, <u></u>
Effective date if applicable: N/A	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 50 days after amenament file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirement	nts, this date will not be listed as the
document's effective date on the Department of State's records.	ino, and date will not be listed as the
document's effective date on the Department of State's records.	
A design of A seed as a follow OND	
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.

لــا	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 FEB. 24, 2023
	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)
	DAVID FIGUEROA
	(Typed or printed name of person signing)
	PRESIDENT

(Title of person signing)