N15000000228

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	#)
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COVER LETTER

TO: Amendment Section Division of Corporations

Rooted NAME OF CORPORATION:	for Life Church Inc	. .		
N15000000	228			
DOCUMENT NUMBER:				
The enclosed Articles of Amendment an	d fee are submitted	for filing.		
Please return all correspondence concern	ing this matter to th	ne following:		
Rosario Briceno				
	(Nam	e of Contact Per	son)	
Rooted for Life Church Inc.				
	(Firm/ Company)		
3106 Moros CT				
		(Address)		•
Fort Mycrs, FL 33905				
	(City	State and Zip C	ode)	
rojobrima@hotmail.com				
E-mail addres	s: (to be used for fu	iture annual repo	rt notification)
For further information concerning this r	natter, please call:			
Rosario Briceno		_ at	239	297 0178
(Name of Co	ontact Person)			(Daytime Telephone Number)
Enclosed is a check for the following am	ount made payable	to the Florida D	epartment of	State:
■ \$35 Filing Fee □\$43.75 F Certifica	te of Status Cer (Ac	i.75 Filing Fee & tified Copy Iditional copy is closed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address		Stre	et Address	

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

Articles of Amendment to Articles of Incorporation of

Rooted for Life Church Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N15000000228 (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: 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: Merary Trevino Name of New Registered Agent: 3016 Arnet LN (Florida street address) New Registered Office Address: , Florida 33935 (Zip Code) Labella (City)

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: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add X Remove	Treasure	Dionicia Rodriguez	4920 Lee Blvd Lehigh Acres, Fl 33905
2) Change Add	Officer	Elvido Tiburcio	4920 Lee Blvd Lehigh Acres, FlL 33971
X Remove	Treasure	Merary Trevino	3016 Arnet LN Labella, Fl 33935
4) Change Add			<u> </u>
Remove 5) Change Add			
6) Change Add			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

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	07/20/2020	
The date of each amendment(s) adoption:	07/20/2020	, if other than the
date this document was signed.		
Effective date if applicable:		
(n	o more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, this date will no t of State's records.	t be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	

	mbers or members entitled to vote on the amendment(s). The amendment(s) was/were pourd of directors.
Dated	07/25/2020
Signatu	
A	(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)
	Jose Madrid JCSE Alberto Madrid REYES. (Typed or printed name of person signing)
	President (Title of person signing)