N15000000583

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Amendment Section
Division of Corporations

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MINISTERIO CA	ASA DE ALABANZ	A INC 	
N15000000583			
The enclosed Articles of Amendment and fee are subm			
Please return all correspondence concerning this matte	r to the following:		
NELSON ARGUETA			
	(Name of Contact Persor)	
VIAJESERVI USA			
	(Firm/ Company)		
454 NW 22 AVE			
	(Address)		
MIAMI, FL 33125			
	(City/ State and Zip Code	e)	
LNELS38@AOL.COM			
E-mail address: (to be used	for future annual report	notification)	
For further information concerning this matter, please	call:		
NELSON ARGUETA	305	649-2249	
(Name of Contact Person)	(Area Co)ode & Daytime Telephone Number)	
Enclosed is a check for the following amount made pa	yable to the Florida Depa	artment of State:	
\$35 Filing Fee Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address		Address	
Amendment Section Division of Corporations	Amendment Section Division of Corporations		

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

Articles of Amendment to **Articles of Incorporation** of

MINISTERIO CASA DE ALABANZA INC

ONSECRET STATE OF AMERICAN OF ANTENANTENE (Name of Corporation as currently filed with the Florida Dept. of State) N15000000583

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006 amendment(s) to its Articles of Incorporation:	, Florida Statutes, this Florida Not For Profit Corporation adopts the f	followin
A. If amending name, enter the new name of	of the corporation:	
		The ner
name must be distinguishable and contain the "Company" or "Co." may not be used in the	word "corporation" or "incorporated" or the abbreviation "Corp." o. name.	r "Inc."
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>		
	`	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		
	registered office address in Florida, enter the name of the	
new registered agent and/or the new re-	gistered office address:	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	, Florida	
_	(City) (Zip Code,)
New Registered Agent's Signature, if change I hereby accept the appointment as registered	ting Registered Agent: agent. I am familiar with and accept the obligations of the position.	
S	gnature of New Registered Agent, if changing	

Page 1 of 4

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)

s 1.

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>V</u> <u>Mik</u>	n <u>Doe</u> te <u>Jones</u> y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	<u>P</u>	REYES HECTOR M.	1613 NW 16 ave.
Add			Apt. # 303
Remove		•	Miami Fl. 33125
2) Change	Т	Romeo G. Duarte	1451 SW 2 St.# 6
X Add			Miami Fl. 33135
Remove 3) Change	Т	DWARTE, ROMEO	1327 SW.4 ST APT 02
Add			MIAMI, FL. 33135
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove		D 0.64	

f amending or addir	ets, if necessary).	(Be specific))				
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	ate of each amendment(3/18/15 s) adoption:	, if other than the
	is document was signed.		
Ellect	ive date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adopt	ion of Amendment(s)	(CHECK ONE)	
	he amendment(s) was/we ras/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) proval.	
	here are no members or n dopted by the board of di	nembers entitled to vote on the amendment(s). The amendment(s) was/were rectors.	
	Dated Signature	in a second seco	
	have no	hairman of vice chairman of the board, president or other officer-if directors to been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)	
	HECTOR	REYES	
	PRESIDE	(Typed or printed name of person signing) NT	
	4/24-22-21-11-11-1	(Title of person signing)	