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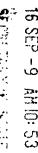


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## **COVER LETTER**

TO: Amendment Section . Division of Corporations NAME OF CORPORATION: Iglesia El Nuevo Renacer Asambleas de Dios, Inc. DOCUMENT NUMBER: N 15 00000 3889 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) (Firm/ Company) P.O. Box 580582 (Address) Kissimmee, FL 34759
(City/State and Zip Code) torres m 2 2 hotmail - com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: son) at 863 (196-2355 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Article	s of Amendment to
Articles	of Incorporation
Iglesia El Nuevo Ren	acer Asaustbleas de Dios, Inc.
(Name of Corporation as current	tly filed with the Florida Dept. of State) ( [1]   [2])
<u> </u>	3889
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:
Iglesia El Nuevo Renaco	ASambleas de Dios, Inc. The new ion" or "incorporated" or the abbreviation "Corp." or "Inc."
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	815 Emmett Street
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Kissimmee, Fl 34741
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 580582 Kissimmee, F1 34758
	Kissimmee, F1 34758
D. If amending the registered agent and/or registered offic	
new registered agent and/or the new registered office ac	<u>ldress:</u>
Name of New Registered Agent:	
	$\Lambda / H$
New Registered Office Address:	(Florida street address)
	. Florida
<del></del>	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:
hereby accept the appointment as registered agent. I am fan	
	NA
Sis	gnature 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 Sn	nes	
Type of Action (Check One)	Title	Name	Address
1) Change Add Remove	T	Benjamin Amaro	312 Drum CT Nissimmee, F1 34259
2) Change Add	I /	<u>Mario Fernando</u> elgado Mancha	901 Bonneville Ln. Kissimmee, Fl 34759
Remove  3) Change  Add  Remove	<u>V</u>	Maribel Amaro	312 Drum CT Kissimmee, Fl 34759
4) Change Add Remove	<u>(</u>	Glenda Sanchez	1010 Dartmoort PL Kissimmee F1 34758
5) Change Add			
Remove  6) Change  Add			
Remove			

The date of each amendment(s) add date this document was signed.	option: September 6, 2016, if oth	er than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not be listed partment of State's records.	as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s) l.	
There are no members or members adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.	
Dated Sep	tember 5- 2016 lis Jour	
have not been	man or vice chairman of the board, president or other officer-if directors n selected, by an incorporator – if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)	
	Julio Torres	
	(Typed or printed name of person signing)	
<del></del>	Chairman (Title of person signing)	
	(Title of person signing)	