N/500005663

(Requestor's Name)				
(Address)				
(Address)				
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(City/State/Zip/Phone #)				
(City Cititation)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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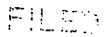
TO: Amendment Section Division of Corporations

Rayaka I NAME OF CORPORATION:	ngnika Moravian Fellowship	o, Inc.	
N1500000566			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and	fee are submitted for filing.		
Please return all correspondence concerni	ng this matter to the followin	g:	
Elizabeh M. Bolanos			
	(Name of Conta	ict Person)	
Rayaka Ingnika Moravian Fellowship, Inc	e.		
	(Firm/ Con	npany)	
4921 81st Avenue Terr. East			
	(Addres	ss)	
Sarasota, FL 34243			
	(City/ State and	Zip Code)	•
rayakaingnika@gmail.com			
E-mail address	: (to be used for future annua	il report notificatio	n)
For further information concerning this ma	atter, please call:		
Hinning Bolanos		941 at	539-2688
(Name of Co	ntact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amo	unt made payable to the Flor	rida Department of	State:
☐ \$35 Filing Fee ☐ \$43.75 F Certificat	iling Fee & S43.75 Filing te of Status Certified Cop (Additional co- enclosed)	y Certif opy is Certif (Addi	0 Filing Fee Teate of Status Ted Copy tional Copy is osed)
Mailing Address		Street Address	

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



Rayaka Ingnika Moravian Fellowship, Inc.			
(Name of Corporation	n as currently f	iled with the Flo	rida Depkler State 4 P D: E0
N15000005663			
(Docu	ment Number of	Corporation (if k	nown) Alle All Association and
Pursuant to the provisions of section 617.1006, Floarmendment(s) to its Articles of Incorporation:	orida Statutes, th	is <i>Florida Not Fo</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:		
Rayaka Ingnika Contemporary Moravian Church,	lne.		The new
name must he distinguishable and contain the wor. "Company" or "Co." may not he used in the nam		or "incorporated	
B. Enter new principal office address, if application	N//	\	
(Principal office address <u>MUST BE A STREET</u> A		<u> </u>	
			
			<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>N/A</u>	\ 	
		- <u> </u>	
D. If amending the registered agent and/or registered agent and/or the new registered.			enter the name of the
-	N/A	<u> </u>	
<u>Name of New Registered Agent:</u>			· · · · · · · · · · · · · · · · · · ·
	N/A		
New Registered Office Address	:	(F	lorida street address)
	N/A		
		(itv)	, Florida (Zip Code)
	·	•	(inp Solie)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			the obligations of the position
accept the appointment of registered ager	i um juminu	. эт ана ассерн	ик обидиновы од те ромиот.
-	Signal	ure of New Regis	tered 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	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Si	ones		
Type of Action (Check One)	Title		Name	<u>Ad</u>	<u>ldres</u> s
1) Change		_	N/A		
Add					
Remove					
2) Change		_	N/A		
Add					·
Remove					
3) Change		_	N/A		
Add					
Remove					
4) Change		_	N/A		
Add					
Remove					
5) Change		_	N/A		
Add					
Remove					
6) Change			N/A	_=	
Add					
Remove					-
					

N/A	(attach additional sheets, if necessary). (Be specific)				
	N/A				
	· · · · · · · · · · · · · · · · · · ·				
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	· · · · · · · · · · · · · · · · · · ·				

	e date of each amendment(s) adoption:	, if other than the
Effe	ective date if applicable:	
	(no more than 90 days after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ument's effective date on the Department of State's records.	be listed as the
Ado	option 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.	
	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 1/9/2019	
	Signature // Cartago	
	(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)	
	Elizabeth M. Bolanos	
	(Typed or printed name of person signing)	
	Trustee. Pastor	
	(Title of person signing)	