

06/26/2016 16:55

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CLARA GIRALDO P.A.

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N15000158323 197

Florida Department of State
Division of Corporations
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DEPT. OF STATE
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TALLAHASSEE, FLORIDA

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
MISSIONARY MINISTRY LOVE OF GOD, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
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DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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Articles of Amendment
to
Articles of Incorporation
of

H150001583233

MISSIONARY MINISTRY LOVE OF GOD, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N15000006197

(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:

The new 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)12990 SW 63 TERRACE
STE #607
MIAMI FL 33183**C. Enter new mailing address, if applicable:**
(Mailing address MAY BE A POST OFFICE BOX)12990 SW 63 TERRACE
STE #607
MIAMI FL 33183**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:**Name of New Registered Agent:JUAN J. CHAMORRO12990 SW 63 TERRACE STE #607

(Florida street address)

New Registered Office Address:MIAMI

(City)

Florida

33183

(Zip Code)

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

H15 000157 3233

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>CHAMORRO, JUAN J, REV</u>	<u>12990 SW 63 TR.</u> <u>MIAMI FL 33185</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>VP</u>	<u>MONTAS, NARCISO H, DR</u>	<u>10678 SW 186 ST</u> <u>MIAMI, FL 33185</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>DEJESUS VARGAS, LUZ D, DR</u>	<u>10680 SW 186 ST</u> <u>MIAMI FL 33157</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>HARDY, LILIAN</u>	<u>12990 SW 63 TERRACE</u> <u>STE #607</u> <u>MIAMI, FL 33183</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

H/150001583233

CHANGE ADDRESS: P- CHANDRO, JUAN J, REV
~~12990 SW 63 TERRACE STE # 607~~
MIAMI FL 33183

DELETE: VP- MONTAS, NARCISO H, DR.
10678 SW 186 ST
MIAMI FL 33185

DELETE: S- DEJESUS VARGAS, LUIS D, DR.
10680 SW 186 ST
MIAMI, FL 33157

ADD: VP- HARDY, LILIAN
12990 SW 63 TERRACE STE # 607
MIAMI FL 33183

H150001583233

SECOND: The date of adoption of the amendment(s) was:

06/25/15

THIRD: Adoption of Amendment (CHECK ONE)

X- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment was sufficient for approval.

- There are no members or members entitled to vote on the amendment. The amendment (s) was (were) adopted by the board of directors.

Signature
chairman or vice chairman, president or other officer

(of the

JOAN J. CHALORRO, REV.
Typed or printed name

PRESIDENT
Title

06/25/15
Date