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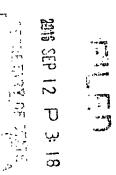
(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

MISSIONERS NAME OF CORPORATION:	OF MERCY/MISION	EROS DE LA N	MISERICORDIA CORP
N15000006356 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee ar	e submitted for filing.	"	
Please return all correspondence concerning this	matter to the following	; :	
	ROY ORTIZ		
	(Name of Contac	et Person)	
MISSIONERS OF MERCY	Y/MISIONEROS DE L	A MISERICOR	DIA CORP
	(Firm/ Com	pany)	
	14125 SW 62 STI	REET	
	(Address	s)	
	MIAMI, FLORIDA	A 33183	
	(City/ State and Z	Zip Code)	
	ortizg40@gmail.com		
	e used for future annua	report notificati	on)
For further information concerning this matter, p	lease call:		
Silvia Ortiz		786 _ at	319-8115
(Name of Contact P	'erson)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount ma	ade payable to the Flori	da Department o	of State:
\$35 Filing Fee \$43.75 Filing F. Certificate of St	ee & □\$43.75 Filing atus Certified Copy (Additional coenclosed)	y Cer py is Cer (Ad	.50 Filing Fee tificate of Status tified Copy ditional Copy is closed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Se Division of Cor Clifton Buildin	ction porations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MISSIONERS OF MERCY/MISION	EROS DE LA MISERICORDIA CORP	
(Name of Corporation as curren	tly filed with the Florida Dept. of State)	
N150000	06356	
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation	es, this Florida Not For Profit Corporation adopts the following	
name must be distinguishable and contain the word "corporal "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable:	14125 SW 62 STREET	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI, FLORIDA 33183	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	14472 SW 50 TERRACE	
(maining want cos intro beautiful be	MIAMI, FLORIDA 33175	
D. If amending the registered agent and/or registered office	ce address in Florida, enter the name of the	
new registered agent and/or the new registered office a	ddress:	
Name of New Registered Agent: SILVIA	DRTIZ	
14125 SV	V 62 ST	
New Registered Office Address:	(Florida street address)	
MIAMI	33183	
	(City), Florida (Zip Code)	
Now Providence Amount Clause 16 1	,	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai		
Spain	wallook -	
	ignature of New Registered Agent, if changing 2	

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>V Mi</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	D	ORLANDO DE ARMAS	12002 SW 128 CT SUITE 208
Add			MIAMI, FLORIDA 33186
X Remove			
2) Change	D	SANDRA A. SALAZAR	5925 ALMEDA RD #2502
Add			HOUSTON, TEXAS 77004
X Remove			
3) Change			
X Add			
Remove			
4) Change	Т	SILVIA ORTIZ	14125 SW 62 ST
🗶 Add			MIAMI, FLORIDA 33183
Remove			***************************************
5) Change	D	NERY MIJANGOS	14125 SW 62 ST
X Add			MIAMI, FLORIDA 33183
Remove			
6) X Change	P	ROY ORTIZ	14125 SW 62 ST
Add			MIAMI, FLORIDA 33183
Remove			

L. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
**-	

		09/06/2016	
	e date of each amendment e this document was signed	(s) adoption:	_, if other than the
	ective date <u>if applicable</u> :	09/01/2016	
		(no more than 90 days after amendment file date)	
		is block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.	e listed as the
Ad	option of Amendment(s)	(CHECK ONE)	
8	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) oproval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
	09/06 Dated	12016 Tho e	
	Signature		_
		chairshen or 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	
		court appointed fiduciary by that fiduciary)	
		ROY ORTIZ	
	_	(Typed or printed name of person signing)	
		PRESIDENT	
		(Title of person signing)	