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SECRETARY OF STATE

DEC 15 2015 R. WHITE

## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUNCITY CHU NAME OF CORPORATION:	RCH,INC	
N15000011225 DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
JUAN SOLER		•
	(Name of Contact Person)	
	(Firm/ Company)	
119 MENORES AVE, APT 12		
	(Address)	
CORAL GABLES, FL, 33134		
	(City/ State and Zip Code)	
Juan@suncity.church or SunCityChurchUS	@gmail.com	
E-mail address: (to be	used for future annual report notification)	···········
For further information concerning this matter, ple	ease call:	
JUAN SOLER	(954) 254-6085	
(Name of Contact Pe		hone Number)
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:	
\$35 Filing Fee \$43.75 Filing Fee Certificate of Sta	e & \$\subseteq\$\$\\$43.75\$ Filing Fee & Certified Copy (Additional copy is enclosed)  \[ \subseteq\$\$\\$\\$\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## FILED

15 DEC 14- AM 6: 54

SUNCITY CHURCH, INC		_SECRETARY OF 51	ATE
(Name of Corporation as c	urrently filed with the Flo	rida Dept. 61 State	MUA
N15000011225			
(Document	Number of Corporation (if I	(nown)	
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not F</i>		ne followin
A. If amending name, enter the new name of the corp	poration:	NIA	
	<del> </del>		<b></b>
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	rporation" or "incorporate	d" or the abbreviation "Corp.	The nev " or "Inc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDR</u>	RESS )		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>			
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		, enter the name of the	AVA
Name of New Registered Agent:			
New Registered Office Address:	(F	lorida street address)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I		the obligations of the position	l
	Signature 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>V</u> <u>Mik</u>	n Doe te Jones y Smith	•
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D	MARIO ZUNIGA	1748 Junction Ave
X Add			San Jose, CA, 95112
Remove			
2) Change	D	MASSIEL GARCIA	220 SW 64th Ave
X Add			Miami, FL, 33144
Remove 3) Change	D	MAURICIO RODRIGUEZ	1327 Locust St
X Add			San Jose, CA, 95110
Remove			
4) Change	D	NATHALIE SMITH	2121N Bayshore Dr. Apt 905
X Add			Miami, FL, 33137
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	•		
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	icles, enter change(s) here: (Re specific)	N/A	
(widen additional sheets, if necessary).	(be specific)		
<u> </u>			
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		<u>=</u>	
		<del></del>	
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	, 		

	date of each amenantico, acoption	her than the
date	this document was signed.	
Effe	ctive date <u>if applicable</u> :	
	(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 be liste iment's effective date on the Department of State's records.	d as the
Add	ption 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 12-08-2015	
	Signature(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)	
	JUAN SOLER	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	