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## COVER LETTER

TO: Amendment Section Division of Corporations

CIELOS ABIERTO NAME OF CORPORATION:	OS PARA LAS NACIO	NES MINIST	ERIO INTERNACIONAL INC
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sul	bmitted for filing.		
Please return all correspondence concerning this ma	tter to the following:		
ROXANA TUMBACO			
	(Name of Contact Per	rsun)	
CORNERSTONE TAX AND ACCOUNTING SER	VICES CORP		
	(Firm/ Company)	)	
4000 HOLLYWOOD BLVD SUITE 555-S			
	(Address)		
HOLLYWOOD , FL 33021			
	(City/ State and Zip C	lode)	
ACCOUNTING@CORNERSTONETAXCORP.CC	)M		
E-mail address: (to be use	ed for future annual repo	ort notification	<u>)</u>
For further information concerning this matter, pleas	se call:		
ROXANA TUMBACO	at _	786	597-9461
(Name of Contact Perso			(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida D	epartment of	State:
S35 Filing Fee  S43.75 Filing Fee & Certificate of Status		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing Address Amendment Section	Stre	eet Address endment Secti	on.
Amendment Section Division of Corporations		enament Secti ision of Corpo	

The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

CIELOS ABIERTOS PARA LAS NACIONES MINISTERIO INTERNACIONAL INC

(Name of Corporation as currently filed with the Flori	da Dept. of State)	
N15000011574		
(Document N	umber of Corporation (if kr	nown)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
	······	The new
name must be distinguishable and contain the word "corp" (Company" or "Co." may not be used in the name.	ooration" or "incorporated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRI	<u></u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		,
Totaling address MAT ULA TOST OF THE HON		
		11:11:02
D. If amending the registered agent and/or registered		enter the name of the
new registered agent and/or the new registered off	<u>ice address:</u>	
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
	(Fit	rida street address)
New Registered Office Address:		
	· · · · · · · · · · · · · · · · · · ·	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I am		the obligations of the position.
	Signature of New Registe	wad toant 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 Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
T) Change Add	D	NOEL PEREZ	11200 NW 59TH CT MIAMI, FL 33012
× Remove			
2) Change Add		•	
Remove 3 ) Remove Add Remove			4
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add		<u> </u>	
Remove			
E. If amending or addin (attach additional shee		nal Articles, enter change(s) here: ssary). (Be specific)	
		- 10-70 · <u>11-70 · 11-</u>	
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*				
The date of each amendment(s) ad date this document was signed.	loption:	<del></del>		, if other than the
Effective date if applicable:				
<del></del>	(no more than 90 days after	r amendment file date)		
Note: If the date inserted in this blo-document's effective date on the Dep	ck does not meet the applicable st partment of State's records.	tatutory filing requiremen	its, this date will not be	e listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )			
The amendment(s) was/were adwas/were sufficient for approva	lopted by the members and the nu ll.	imber of votes cast for the	e amendment(s)	

	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	JUNE 21ST 2020				
	Signatur	<b>A</b>	.•			
Signatur		(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)				
		JOHNNY PRADA				
		(Typed or printed name of person signing)				
		PRESIDENT				

(Title of person signing)