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I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	IGLESIA VIDA CR DN:	ISTIANA DE PEMBROI	KE PINES,	INC
DOCUMENT NUMBER:	N16000000707			
The enclosed Articles of Am	eendment and fee are subr	mitted for filing.		
Please return all corresponde	ence concerning this matte	er to the following:		
LAVERNE STEPHENS				
		(Name of Contact Person	1)	
MULTIDIMENSIONS DEV	VELOPMENT INC			
		(Firm/ Company)		
1100 SW 130th AVE, H-20	7 .			
		(Address)		
PEMBROKE PINES, FLOR	RIDA 33027			
		(City/ State and Zip Code	e)	· · · · · · · · · · · · · · · · · · ·
LAVSTEP2@AOL.COM				
E	-mail address: (to be used	for future annual report i	notification	)
For further information conc	erning this matter, please	call:		
LAVERNE STEPHENS		404 at	1-2742899	
	(Name of Contact Person		ea Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida Depa	ertment of S	State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Mailing A	ddress	Street	<u>Address</u>	

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

IGLESIA VIDA CRISTIANA DE PEMBROKE PINES, INC

(Name of Corporation as	currently filed with the Florida	a Dept. of State)
N16000000707		
(Document	Number of Corporation (if know	wn)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For F	Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	rporation:	
IGLESIA VIDA CRISTIANA, INC.		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated" (	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD		
Timequi office unitess MOST BE A STREET ADDI	<u></u>	7-5 23
		7 7 7
	/	The sale of the sa
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	N/A	io co l
(maining dualess MAT BE A TOST OF FICE BOX	<u> </u>	
	<u></u>	
		<u> </u>
D. If amonding the assistant and another discussion	ad affice address to Florida and	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		ter the name of the
LA	VERNE STEPHENS	
Name of New Registered Agent:	00 SW 130TH AVE H-207	
		da stuast adduses)
New Registered Office Address:	(riora	da street address)
PE	MBROKE PINES	, Florida 33027
<del></del>	(City)	(Zip Code)
Nam Donigtoned Amentle Cimetum (fater - to - to - to -		
New Registered Agent's Signature, if changing Regit I hereby accept the appointment as registered agent.		/ ) e/obligations of the position.
,	Ly All	
	Signature of New Register	ed 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.

X Change X Remove X Add	<u>V</u> <u>Mil</u>	n Doe ke Jones ly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	JORGE MEDINA	12150 NW 28th COURT
X Add			PLANTATION, FL
Remove			33323-1765
2) Change	S	SUSY MEDINA	12150 NW 28th COURT
X Add			PLANTATION, FL
Remove			33323-1765
3) Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add	<del></del>		, <b>,</b> , , , , , , , , , , , , , , , , ,
Remove			
6) Change		N/A	
Add			
Remove			

(attach additional sheets, if necessary). (Be specific)
AMEND ARTICLE III - The corporation is organized exclusively for charitable, religious, educational and scientific
purposes under Section 501 (c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.
ADD ARTICLE IX - Upon the dissolution of this organization, assets shall be distributed for one or more exempt purposes
within the meaning of Section 501 (c) (3) of the Internal Revenue Code, or corresponding section of any future federal tax
code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

E. If amending or adding additional Articles, enter change(s) here:

	e date of each amendment(s) adoptice this document was signed.	on:	, if other than the
Effe	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
	e: If the date inserted in this block dument's effective date on the Departs	oes not meet the applicable statutory filing requirements, this date will not nent of State's records.	t be listed as the
Ado	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	
	There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
	Dated February 27, 20	<b>1</b> 6	
	Signature Putho shorman	or vice chairman of the board, president or other officer-if directors	<del></del>
	have not been se	elected, by an incorporator – if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)	
	Jorge Medina	t.	
	<del> </del>	(Typed or printed name of person signing)	
	Vice Preside	nt	
		(Title of person signing)	