## N16000001768

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## COVER LETTER

TO: Amendment Section Division of Corporations

The enclosed Articles of Amendment and fee are submitted for tiling.  Please return all correspondence concerning this matter to the following ROBERTO ARC	_		
ROBERTO ARO	_		
	ener ( o		
(Name of Contac	TOELLO		
	et Person)		
CASA HISPANA DE M	ULTISERVICIO	S INC	
(Firm/ Comp	oany)		
4206 ENTERPRISE AVE	NUE SUITE AS		
(Address	<b>,</b> )		
NAPLES, FL 3	34104		
(City/ State and z	Zip Code)		
CASAHISPANADEMULTISER	RVICIOS@GMAI	L.COM	2822 101-
E-mail address: (to be used for future annual	report notification	en)	
for further information concerning this matter, please call:			1
ROBERTO ARGUELLO	239 at	610-0920	Number)
(Name of Contact Person)		(Daytime Telephone	Number)

(Additional copy is

enclosed)

**Mailing Address** 

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certified Copy (Additional Copy is

Enclosed)

## Articles of Amendment to Articles of Incorporation of

COMUNIDAD CRISTIANA CAMINOS DE ESPERANZA, INC

(Name of Corporation as currently filed with the Florid N16000001768	da Dept. of State)	
	umber of Corporation (if known	)
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Pre	fit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	
COMUNIDAD CRISTIANA CAMINO DE ESPERANZ	A, INC	The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorporated" or	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOX 111965	
	NAPLES, FL 34108	2022 JUL
D. If amending the registered agent and/or registered	office address in Florida, ente	·
new registered agent and/or the new registered offi		<u> </u>
Name of New Registered Agent:		
		بده و م
New Registered Office Address:	(Florada	street address)
		, Florida
	(Ciţy)	(Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I ar		bligations of the position.
	Signature of New Registered	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	PT         John Do           V         Mike Jo           SV         Sally Sr	ne <u>ş</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>VP</u>	DAYMA GARCIA	1460 13TH STREET SW NAPLES, FL 34117
× Remove			
2) Change Add	<u>T</u>	Rosa Alejandra Parra Cordero	2056 Wellington ST Naples, FL 34120
Remove Change Add Remove	<u>VP</u>		2056 Wellington ST Naples, FL 34120
4) Change Add			
Remove  5) Change Add Remove			
6) Change Add			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	

·	
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The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable: 06/24/2022	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	oe listed as the
Adoption 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.	

Dated	06/24/2022
17died	( De Char.
Signature	/ 100 / 120 /
	(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)
	LUIS A. SANGHEZ
	(Typed or printed name of person signing)