N16000003225

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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	RIO DE DIOS MO:	NTE OREB INC	1 SEP 23		
DOCUMENT NUMBER:	N16000003225				
The enclosed Articles of Amendment and fee are sub	mitted for filing.				
Please return all correspondence concerning this matter	er to the following:		•		
ORL	ANDO CARRASQ	UILLO			
	(Name of Contact I	Person)	<u> </u>		
OC C	CONSULTING FIR	M INC.			
	(Firm/ Compar	ny)			
491	I SPARKLING PIN	ES CIR			
	(Address)				
FC	ORT PIERCE, FL 34	1951			
	(City/ State and Zip	Code)			
OCCONSULT	INGFIRM@YAHO	О.СОМ			
E-mail address: (to be used	for future annual re	port notification	1)		
For further information concerning this matter, please	call:				
ORLANDO CARRASQUILLO		561	542-5465		
(Name of Contact Person		(Area Code)	(Daytime Telephone Number)		
Enclosed is a check for the following amount made pa	yable to the Florida	Department of S	State:		
☐ \$35 Filing Fee	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certifi is Certifi	cate of Status ed Copy ional Copy is		
Mailing Address Amendment Section		Street Address Amendment Section			
Division of Corporations	Division of Corporations				

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

MINISTERIO DE DIOS MONTE OREB INC.

(Name of Corporation as currently filed with the Florida Dept. of State) N16000003225 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006. Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: IGLESIA DE DIOS MONTE HOREB INC. name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. 3290 SE SLATER STREET B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) STUART FL 34997 C. Enter new mailing address, if applicable: 2549 SE MADDISON STREET (Mailing address MAY BE A POST OFFICE BOX) STUART FL 34997 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: EDGAR G. CARRILLO PEREZ Name of New Registered Agent: 2549 SE MADDISON STREET (Florida street address) New Registered Office Address: . Florida <u> </u> STAURT (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations 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 De V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			·
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	4		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		•	

f amending or adding additional Art attach additional sheets, if necessary).	(Be specific)					
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The date of each amendment(s) adoption:	, if other than th
Effective date <u>if applicable</u> :	îile date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the members and the number of votes was/were sufficient for approval.	east for the amendment(s)
There are no members or members entitled to vote on the amendment(s). The a adopted by the board of directors.	imendment(s) was/were
Dated 9/22/2017	
Signature / Consulto	
(By the chairman or vice chairman of the board, president or have not been selected, by an incorporator – if in the hands other court appointed fiduciary by that fiduciary)	
EDGAR G. CARRILLO PEI	REZ
(Typed or printed name of person	n signing)
PRESIDENT	
(Title of person signi	ng)