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COVER LETTER

TO: Amendment Section Division of Corporations

IGLESIA PENTEC	COSTAL BETANIA - CIC	P INC	_ <u>_</u>
N16000007362 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sul	hmitted for filing.		
Please return all correspondence concerning this mat	tter to the following:		
LEYLA SCAPARONE			
	(Name of Contact Person	1)	
JOHN P. MAAS, ESQ.			
	(Firm/ Company)		
44 NE 16 STREET			
	(Address)		
HOMESTEAD, FLORIDA 33030			
	(City/ State and Zip Cod	e)	
E-mail address: (to be use	ed for future annual report	notification)	
For further information concerning this matter, pleas	se call:		
LEYLA SCAPARONE	30 at	5 247-7132	
(Name of Contact Perso		rea Code) (Daytime Telephone	Number)
Enclosed is a check for the following amount made	payable to the Florida Dep	artment of State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address		Address Iment Section	

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

IGLESIA PENTECOSTAL BETANIA - CICP IN	C			_	
Name of Corporation as currently filed with the	Florida D	ept. of State)			
N16000007362					
(Docum	nent Numbe	r of Corporation	on (if known)		
Pursuant to the provisions of section 617.1006. Flo amendment(s) to its Articles of Incorporation:	rida Statutes	s, this <i>Florida</i>	Not For Profit Corp	oration adopts the	following
A. If amending name, enter the new name of the	e corporati	on:			
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	l "corporati g.	on" or "incor	porated" or the abbi	reviation "Corp." c	_The new or "Inc."
B. <u>Enter new principal office address, if applica</u> (Principal office address <u>MUST BE A STREET A</u>					
					~
				<u> </u>	-5
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	R()Vi				DEC .
(Mailing dadress MAT BE ATOST OTTICE	<u> 100.x</u> /			0.2	9
					72
				<u> </u>	_ _ ੜ
D. If amending the registered agent and/or reginew registered agent and/or the new registered.	stered offic ed office ac	e address in F ldress:	lorida, enter the na	ime of the	PH 12: 25
Name of New Registered Agent:	PEDRO C	ALDERON			_
<u></u>	15250 HA	RRISON DRI	VE		
			(Florida street add	ress)	
New Registered Office Address:					
	HOMEST	EAD		Florida <u></u>	
		(City)		(Zip Code)	
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen	Registered n. Lam fan	Agent: niliar with and	accept the obligation	ns of the position.	
_	Pe	le C	calm	_	
	Šiņ	$mature\ of\ ar{New}$	Registered Agent, i	f changing	

Page 1 of 4

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 I Y Mike I SV Sally S	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	PD	GILBERTO COLON, SR.	15504 SW 306 STREET HOMESTEAD, FL 33033
XRemove			
2) Change Add	SD	NATIVIDAD ANDRADES, SR.	27028 SW 135 AVENUE HOMESTEAD, FL 33032
X Remove 3) X Change Add Remove	SD	MARGARITA PEREZ	29425 154 COURT HOMESTEAD, FL 33033
4) Change Add	PD	PEDRO CALDERON	HOMESTEAD, FL 33033
Remove 51 Change × Add	<u>T</u>	HILDA CALDERON	15250 HARRISON DRIVE HOMESTEAD, FL 33033
Remove			
6) Change Add			
Remove E. <u>If amending or additate additional she</u>		Page 2 of 4 rticles, enter change(s) here: (Be specific)	
,	<u></u>		
	<u>. </u>		
	 _		

	
	
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	<u></u>
Page 3 of 4	
The date of each amendment(s) adoption:	if other than the
Effective date if applicable:	
Effective date if applicable:	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be 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.

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 12/13/19
Signature Gilbert E-la
(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)
GILBERTO COLON
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)