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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION		INIDOS EN JESUS INC 	·	
DOCUMENT NUMBER:		00009677		
The enclosed Articles of Am	endment and fee are subn	nitted for filing.		
Please return all corresponde	nce concerning this matte	r to the following:		
		ELIEZER DURAN		
-	· · · · · · · · · · · · · · · · · · ·	(Name of Contact Perso	n)	
	DURA	N GROUP & ASSOCIA	ATES, P.A.	
	·	(Firm/ Company)		
	1001	N FEDERAL HWY, SU	ЛТЕ 355	
-		(Address)		<u> </u>
	HAL	LANDALE BEACH, F	L 33009	
		(City/ State and Zip Cod	e)	
		info@durangrouppa.con	n	
E	-mail address: (to be used	for future annual report	notification	1)
For further information cone	erning this matter, please	call:		
	ELIEZER DURAN	a)		305-900-5515
	Name of Contact Person)	atat(A)	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pa	yable to the Florida Dep	artment of	State:
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Difiling Fee icate of Status ied Copy tional Copy is used)
Mailing A	ddress	Street	Address	

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

Articles of Amendment to Articles of Incorporation of

UNIDOS EN JESUS INC.

Name of Corporation as currently filed with the Florid	la Dept. of State)	
	N16000009677	
(Document Nu	inber of Corporation (if kn	nwn)
fursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:	
MINISTERIO APOSTOLICO UN	IDOS EN CRISTO, INC.	The nev
name must be distinguishable and contain the word "corpo "Company" or "Co." may not he used in the name.	oration" or "incorporated"	
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u> .	SS)	
	 ,	ج-
		273
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
		——————————————————————————————————————
		ក្ក 2:
		آدا سد
. If amending the registered agent and/or registered of	ffice address in Florida, e	nter the name of the
new registered agent and/or the new registered offic	e address:	
Name of New Registered Agent:		
		
New Registered Office Address:	(Floi	ida stree: address)
		, Florida
	(City)	(Zip Code)
lew Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am	ed Agent: familiar with and accept to	ae obligations of the position.
	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.

Example: X.Change X.Remove X.Add	PT John Do V Mike Jo SV Sally St	ne <u>s</u>	
Type of Action (Check One)	Title	Name	<u>Address</u>
1) Change Add	Director	NARCISO H. MONTAS	25841 South Dixie Hwv. Apt 323 Homestead, FL 33032
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			-18-84 y-1y-1
5) Change Add		<u></u>	
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee.	g additional Articles, if necessary).	cles, enter change(s) here: (Be specific)	
	<u> </u>		
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			<u></u>	
				
	<u> </u>	41.		
-			- -	
				
	<u> </u>			
				
The date of each amendment(s) adopti date this document was signed.	on:			_, if other than the
Effective date if applicable:				
	(no more than 90 days o	ifier amendment file do	ute)	
Note: If the date inserted in this block document's effective date on the Department.	oes not meet the applicable and of State's records.	le statutory filing requi	rements, this date will not b	ne 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	JUNE 08, 2020
Signatur	
-	(By the chairmap of the chairman of the board, president or other officer-if directors have not been selected, by an incorporator – it in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Ana Reyes
	(Typed or printed name of person signing)