

N16000 010 C32

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status ✓

Special Instructions to Filing Officer:

Office Use Only



700337425897

12/02/19--01013--017 **43.75

S. TALLENT

FEB 19 2020

2020 FEB 18 AM 10:28

FILED

Amend
PLC



2020 FEB 13 AM 5:06

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 31, 2020

MARIA M. CALDAS-LOPES
MADE IN BRAZIL SERVICES
12811 KENWOOD LANE STE. #208
FORT MYERS, FL 33907

SUBJECT: IGREJA ASSEMBLEIA DE DEUS MINISTERIO FERG INC
Ref. Number: N16000010032

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

PLEASE COMPLETE PAGE 4 OF 4 AND RESUBMIT. NON PROFIT CORPORATIONS DO NOT HAVE SHAREHOLDERS.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 920A00001468



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 21, 2020

MARIA M. CALDAS-LOPES
MADE IN BRAZIL SERVICES
12811 KENWOOD LANE STE. #208
FORT MYERS, FL 33907

SUBJECT: IGREJA ASSEMBLEIA DE DEUS MINISTERIO FERG INC
Ref. Number: N16000010032

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

PLEASE COMPLETE PAGE 4 OF 4 AND RESUBMIT. NON PROFIT CORPORATIONS DO NOT HAVE SHAREHOLDERS.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 920A00001468

2020 JAN 23 AM 10:12



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 9, 2020

MARIA MADALENA CALDAS-LOPES
MADE IN BRAZIL SERVICES
12811 KENWOOD LANE STE. #208
FORT MYERS, FL 33907

SUBJECT: IGREJA ASSEMBLIA DE DEUS MINISTERIO FERG INC
Ref. Number: N16000010032

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 920A00000625

2020 JAN 17 PM 12:00

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: IGREJA ASSEMBLEIA DE DEUS MINISTERIO FERG INC

DOCUMENT NUMBER: N16000010032

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARIA M. CALDAS LORES
(Name of Contact Person)

MADE IN BRAZIL SERVICES
(Firm/ Company)

12811 KENWOOD LANE STE #203
(Address)

FORT MYERS, FL 33907
(City/ State and Zip Code)

MADEINBRAZILSERVICES@HOTMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIA M. CALDAS LORES at 239 8106079
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(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

Articles of Amendment
to
Articles of Incorporation
of

IGREJA ASSEMBLEIA DE DEUS MINISTERIO FERRE INC
(Name of Corporation as currently filed with the Florida Dept. of State)

N16000010032

(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:

IGREJA ASSEMBLEIA DE DEUS MINISTERIO AGAPE INC *The new 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.*

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

Name of New Registered Agent: MADE IN BRAZIL SERVICES

12811 KENWOOD LANE STE #208

(Florida street address)

New Registered Office Address:

FORT MYERS

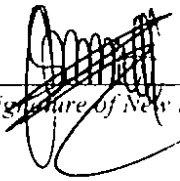
(City)

Florida 33907

(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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>N/A</u>	_____	_____ _____ _____
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>N/A</u>	_____	_____ _____ _____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>N/A</u>	_____	_____ _____ _____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>N/A</u>	_____	_____ _____ _____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>N/A</u>	_____	_____ _____ _____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>N/A</u>	_____	_____ _____ _____

Page 2 of 4

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

(attach additional sheets, if necessary). (Be specific)

N/A

Page 3 of 4

Page 3 of 4

The date of each amendment(s) adoption: 11/26/2019 if other than the date this document was signed

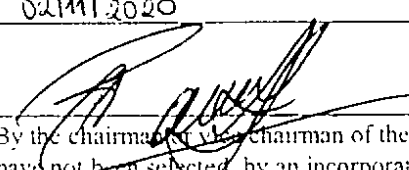
Effective date if applicable: 11/26/2019
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 02/11/2020

Signature 
(By the chairman or the 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)

RONNIE ALMEIDA ANDRADE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)