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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ON: Iglesia	de Dins Jeho	va shama sanford, Inc.
DOCUMENT NUMBER		N (200	
DOCUMENT NUMBER:	N160000	211809	
The enclosed Articles of Art	nendment and fee are sub-	mitted for filing.	
Please return all correspond	ence concerning this matte	er to the following:	
	Yolar	da Helende	7
-	•	(Name of Contact Perso	on)
		(Firm/ Company)	
		(Fillio Company)	
	1803 Pale	ma avenue	
-		(Address)	
 -	Sanford F	(City/ State and Zip Coo	
		(City/ State and Zip Cod	de)
	Glesia Jehova si mail address: (to be used	amin a minur	1-com
I	mail address: (to be used	for future annual report	notification)
For further information conc	erning this matter, please	call:	
	iz Franco	at <u>(</u>	107)792-9234
	(Name of Contact Person)	(A	rea Code) (Daytime Telephone Number)
Enclosed is a check for the f	following amount made pay	yable to the Florida Dep	artment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & 1	☑\$ 43.75 Filing Fee &	□\$52.50 Filing Fee
	Certificate of Status	Certified Copy	Certificate of Status
		(Additional copy is	Certified Copy
		enclosed)	(Additional Copy is
			Enclosed)
Mailing A	ddraes	S44	4 .d.d

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Talkahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

VI	
Igiesia de Dios Jehova Shama sanford Inc.	···
(Name of Corporation as currently filed with the Florida Dept. of State)	
Niliaco 11803	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the folloamendment(s) to its Articles of Incorporation:	owing
A. If amending name, enter the new name of the corporation:	
	e new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or " "Company" or "Co." may not be used in the name.	lne."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	—
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: Veronica Velazquez	
1803 Paloma Avenue	
(Florida street address) New Registered Office Address:	
· · · · · · · · · · · · · · · · · ·	
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.	
'r san y dae op an dae de cepran an dae de cepran and dae de cepran an dae	
Signature of New Registered Agent, if changing	
Mignature of New/Registered Agent, if changing	
The transfer of the second sec	77
Page 1 of 4	3

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	<u>V</u> <u>Mik</u>	n Doe te Jones ty Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>PD</u>	Yolanda Melendez	1803 Paloma Avenue Sanford, Fl 32771
2) Change Add Remove	PD	Liz Franco	1803 Faloma Avenue Sanford, Fl. 32771
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			
Kemove		Dags 2 -54	

If amending or adding additional A attach, additional sheets, if necessary). (Be specific)					
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The date of each amendment(s) ad	option:	_, if other than th
ate this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo locument's effective date on the De	ck does not meet the applicable statutory filing requirements, this date will not partment of State's records.	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac was/were sufficient for approva	lopted by the members and the number of votes cast for the amendment(s).	
There are no members or members adopted by the board of directors	pers entitled to vote on the amendment(s). The amendment(s) was/were ors.	
Dated	21-18	
Signature	is tanco	
have not be	man or vice chairman of the board, president or other officer-if directors en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
<u> </u>	LIZ Franco	
	(Typed or printed name of person signing)	
	President	
-	(Title of person signing)	