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> MAR 3 1 2020 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Casa de	Adorcia destinados para
reinar, I	
DOCUMENT NUMBER: N170000	01562
The enclosed Articles of Amendment and fee are sub-	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
	(Name of Contact Person)
	(Name of Contact Person) U
Casa de Adoración de	strados para remar inc
_	
4 9329 Su	iset DR.
	(Address)
Tampa, I	(City/ State and Zip Code)
,	(City/ State and Zip Code)
E-mail address: (to be used	1 for future annual report notification)
For further information concerning this matter, please	
Meseria Cruz	at 813-453-7564 (Area Code) (Daytime Telephone Number)
(Name of Contact Person	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pa	·
\$35 Filing Fee	□S43.75 Filing Fee & □S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of

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Name of Corporation as currently filed with the File		para remar	<u> </u>
		,	
N170000D			 .
(Document	Number of Corporation (if	(nown)	
rursuant to the provisions of section 617,1006, Florida mendment(s) to its Articles of Incorporation:	Statutes, this Florida Not F	or Profit Corporation adopts	the following
. If amending name, enter the new name of the co	rporation:		
MACTON DE E	F CANR	JUC.	The new
ame must be distinguishable and contain the word "co	orporation" or "incorporate	d" or the abbreviation "Corp	o." or "Inc."
Company" or "Co." may not be used in the name.			
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADD</u>			
	_	-	
			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	411 Div	Pant C+	
(matting datatess MAT BL A 103) OF FICE BO.		T) 33551	
	Setzoer	F1. 22884	
	,		
 If amending the registered agent and/or registered new registered agent and/or the new registered of 		, enter the name of the	
Name of New Registered Agent:	 		
New Registered Office Address:	O	Torida street address)	
 -	(City)	, Florida (Zip Code)	
	(City)	(zip couc)	
ew Registered Agent's Signature, if changing Regi	stered Agent:	a ali i i i kili i i aki i i i i i i i i i i i i i i i	
hereby accept the appointment as registered agent. I	am jamiliar wun ana accep	i the obligations of the positio	n.
	Signature of New Regis	tered Agent, if changing	2021
	engiana e of their negati	icrea rigerii, iy eriarigirig	
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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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		onal Articles, enter change(s) here: ssary). (Be specific)	
-			
			

	
	
The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: (no more than 90 days after amendment file	a datas
ino more inan 90 days ajier amenament jii	e umej
Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	equirements, this date will not be listed as the
·	

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

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 March - 10 - 2020
Signature (By 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)
(Typed or printed name of person signing)
Corporate assitant (Title of person signing)