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COVER LETTER

TO: Amendment Section Division of Corporations

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| IGLESIA EVANG | SELICA APOSTOLES Y PROFETAS EFESIOS 2:20 INC. |
|--|--|
| N17000002249 | |
| The enclosed Articles of Amendment and fee are su | abmitted for filing. |
| Please return all correspondence concerning this ma | · |
| RONALD MEDRANO | |
| | (Name of Contact Person) |
| Rorald Medsano | |
| | (Firm/ Company) |
| 3145 CROOKED CAY CT | |
| | (Address) |
| LAKE WORTH , FL 33462 | |
| | (City/ State and Zip Code) |
| MAPINIRI M@GMAIL.COM | |
| E-mail address: (to be us | ed for future annual report notification) |
| For further information concerning this matter, pleas | se call: |
| RONALD MEDRANO | on) (Area Code) (Daytime Telephone Number) |
| (Name of Contact Perso | on) (Area Code) (Daytime Telephone Number) |
| Enclosed is a check for the following amount made: | payable to the Florida Department of State: |
| ■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status | & 🗆 \$43.75 Filing Fee & — \$552.50 Filing Fee s Certified Copy — Certificate of Status (Additional copy is — Certified Copy enclosed) — (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |

Articles of Amendment to Articles of Incorporation of

ICLESIA EVANGELICA APOSTOLES Y PROFETAS EFESIOS 2:20 INC

| IGLESIA EVANGELICA APOȘ I | | | | |
|--|------------------------|--------------------------------------|---------------------------------|---------------------------------------|
| (Name of Co | rporation as curren | tly filed with the Florida De | ept. of State) | |
| N17000002249 | | | | |
| | (Document Numb | er of Corporation (if known) | | |
| Pursuant to the provisions of section 647, amendment(s) to its Articles of Incorpora | | es, this <i>Florida Not For Prof</i> | <i>it Corporation</i> adopts th | he following |
| A. If amending name, enter the new na | ame of the corporat | ion: | | |
| | | | | The new |
| name must be distinguishable and contain | | tion" or "incorporated" or t | he abbreviation "Corp. | " or "Inc." |
| "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: | | 3145 CROOKED CAY CT | | 哲学 |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> | LAKE WORTH , FL 3346 | 2 | | |
| | | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 3145 CROKKED CAY CT | | | |
| | | LAKE WORTH, FL 33462 | <u> </u> | ्र - ⁻ |
| | | | | |
| D. If amending the registered agent an | nd/or revistered offic | ce address in Florida, enter | the name of the | |
| new registered agent and/or the nev | | | we manne we enter | |
| Name of New Registere | rd Agent: | | | · · · · · · · · · · · · · · · · · · · |
| ; | | | | |
| New Registered Office | <u>e Address</u> ; | (Flocida s) | reet address) | |
| | | | , Florida | |
| | | (Ciṃ) | (Zip Code) | |
| New Registered Agent's Signature, if c I hereby accept the appointment as regist | | | oligations of the position | I. |
| | y Ro | nald Modrano | _ \ | |
| • | . S | ignature of New Registered A | lgent, 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 Evecutive 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 Doc, 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>Mil</u> | nn Doe ke Jones ly Smith | |
|--------------------------------------|---------------------|--------------------------------|---|
| Type of Action (Check One) | <u>Title</u> | Name | <u>Addres</u> s |
| 1) Change | P | RONALD MEDRANO | 3145 CROOKED CAY CT |
| X Add | | | LAKE WORTH , FL 33462 |
| Remove | 1 | | |
| 2) Change | V , | ANNA MARIA HERNANDEZ DE | 3145 CROOKED CAY CT |
| X Add | | | LAKE WORTH , FL 33462 |
| Remove 3.) Change X Add | <u>T</u> | JOSE ABRAHAM PORTILLO | 3145 CROOKED CAY CT LAKE WORTH, FL 33462 |
| Remove 4) Change X Add | sv | WALTER PARADA | 3145 CROOKED CAY CT LAKE WORTH, FL 33462 |
| Remove Add Remove | | | |
| 6) Change Add Remove | | | |

| E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) | | | | |
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Page 3 of 4

| The | date of each amendment(s) ado | ption: | , if other than the |
|------|---|---|------------------------|
| date | this document was signed. | | |
| Effe | 11/11. ective date <u>if applicable</u> : | (2017 | |
| | | (no more than 90 days after amendment file dote) | |
| | e: If the date inserted in this bloc iment's effective date on the Dep | k does not meet the applicable statutory filing requirements, this date wil artiment of State's records. | I not be listed as the |
| Ade | option of Amendment(s) | (CHECK ONE) | |
| | The amendment(s) was/were add was were sufficient for approval | pited by the members and the number of votes east for the amendment(s) | |
| | There are no members or member adopted by the board of director | ers entitled to vote on the amendment(s). The amendment(s) was were s. | |
| | Dated | <u> </u> | |
| | Signature × Typ | aeld Modrano. | |
| | have not been | nan or vice chairman of the board, president or other officer-if directors is selected, by an incorporator – if in the hands of a receiver, trustee, or spointed fiduciary by that fiduciary) | |
| | A | ONALD MESIGNO | |
| | | (Typed or printed name of person signing) | |
| | | (Title of person signing) | |
| | | / (Title of person signing) | |