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## **COVER LETTER**

TO: Amendment Section Division of Corporations

CHRISTIAN . NAME OF CORPORATION:	ZION UNIVERSITY, INC
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee a	re submitted for filing.
Please return all correspondence concerning thi.	s matter to the following:
ELISEO RODRIGUEZ	
	(Name of Contact Person)
CHRISTIAN ZION UNIVERSITY, INC.	
	(Firm/ Company)
1455 WEST FLAGLER STREET	
	(Address)
MIAMI, FLORIDA 33135	
	(City/ State and Zip Code)
gsracetg@yahoo.com	
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter,	please culf:
GLORIA S RUIZ	305 557-1588
(Name of Contact	Person) at(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount m	nade payable to the Florida Department of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing I Certificate of \$	Fee & <b>B</b> \$43.75 Filing Fee &
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

## CHRISTIAN ZION UNIVERSITY, INC.

(Name of Corporation as curren	tly filed with the Fl	orida Dept. of State)	
N17000003328			
(Document Numb	er of Corporation (if	known)	
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not I</i>	For Profit Corporation adopts th	e following
A. If amending name, enter the new name of the corporat	ion:		
			The new
name must be distinguishable and contain the word "corpora "Company" or "Co," may not be used in the name.	tion" or "incorporat	ted" or the abbreviation "Corp."	or "Inc."
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)		<u> </u>	17
(maining maness <u>mest the server of tree nos</u> )		2.	
		<u>_</u> :	
D. If amending the registered agent and/or registered offi		a, enter the name of the	1.2 m² 150
new registered agent and/or the new registered office a	iddress:	;; ;	•••
Name of New Registered Agent:		·	
		(Florida street address)	
New Registered Office Address:		trioriai succi auaressi	
		Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent: miliar with and acce	pt the obligations of the position	ı.
	ignature of New Rev	ustered 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	<u>V</u> <u>Mi</u>	in Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	Т	ANNA R GONZALEZ	3176 SW 25 TERRACE
Add			MIAMI, FL 33133
Remove			
2) Change	P	ELISEO RODRIGUEZ	3176 SW 25 TERRACE
X Add			MIAMI, FL 33133
Remove			
3 ) Change			<del></del>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

<mark>lf amending or adding additional</mark> attach additional sheets, if necessa	y). (Be specific)		
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06/01/2017	
	if other than the
date this document was signed.	
06/01/2017	
Effective date <u>if applicable</u> : (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.	
06/05/2017 Dated	
Signature Signature	
(By the chairman or vice 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)	
ELISEO RODRIGUEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	