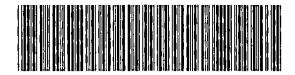
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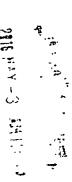
| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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MAY ON 2018

COVER LETTER

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

| COVER LETTER TO: Amendment, Section 1 Division of Corporations REYNO ETERNO CHURCH INC NAME OF CORPORATION: N17000003591 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CLAUIDO A TOLEDO (Name of Contact Person) REYNO ETERNO CHURCH IN (Firm/ Company) 11819 BARLETTA DR (Address) ORLANDO FL 32827 | |
|--|----------|
| The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CLAUIDO A TOLEDO (Name of Contact Person) REYNO ETERNO CHURCH IN (Firm/ Company) 11819 BARLETTA DR (Address) | <u> </u> |
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| (Firm/ Company) 11819 BARLETTA DR (Address) | |
| 11819 BARLETTA DR (Address) | |
| (Address) | |
| | |
| ORLANDO FL 32827 | |
| | |
| (City/ State and Zip Code) | |
| CLAUDIOTOLEDORAMREZ@HOTMAIL.COM | |
| E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| CLAUDIO A TOLEDO 407-820-4280 | |
| (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: | |
| S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed) S52.50 Filing Fee Certified Copy (Additional Copy is Enclosed) | |
| Mailing Address Amendment Section Street Address Amendment Section | |

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment to Articles of Incorporation of

REYNO ETERNO CHUCH INC

| (Name of Corporation as of | currently filed with the Florida De | ept. of State) |
|--|--------------------------------------|---------------------------------------|
| N17000003591 | | دن . |
| (Document | Number of Corporation (if known) | - |
| Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation: | Statutes, this Florida Not For Profi | t Corporation adopts the following |
| A. If amending name, enter the new name of the cor | rporation: | |
| | | The new |
| name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name. | orporation" or "incorporated" or th | |
| B. Enter new principal office address, if applicable: | | |
| (Principal office address <u>MUST BE A STREET ADD</u>) | RESS) | · · · · · · · · · · · · · · · · · · · |
| | | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX | κ) | |
| | <u> </u> | |
| | | |
| | | |
| | | |
| If amending the registered agent and/or registered new registered agent and/or the new registered or | | the name of the |
| | THE BUSINESS. | |
| Name of New Registered Agent: | | |
| | | |
| N= Designation 100 All | (Florida str | eet address) |
| New Registered Office Address: | | |
| - | | Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Regis | stered Agent: | |
| hereby accept the appointment as registered agent. 1 | am familiar with and accept the obl | igations of the position. |
| | | |
| | | |
| | Signature of New Registered Ag | gent, 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>Mik</u> | n Doe e Jones y Smith | |
|----------------------------------|---------------------|-----------------------------|-------------------|
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | MGRM | MIRANDA MARITZA | 11819 BARLETTA DR |
| X Add | | | ORLANDO FL 32827 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| റ Change | | | |
| Add | | | |
| Remove | | | |

| (attach additional sheets, if necessary). (Be specific) |
|---|
| 1-UPON DISOLUTION THE REMIAINING ASSETS .ARE EXCLUSIVELY FOR EXEMPT PURPOSE.IF DISOLUTION |
| 2-MARITZA MIRANDA IS THE PASTORA AND WIFE OF CLAUDIO A TOLEDO THE PRESIDENT AND PASTOR |
| OF THE CHURCH. |
| 3-COMPENSATION OF DIRECTORS.OFFICERS,OTHERS IF ANY MUST BE APROVE IN ADVANCE AND WRITT |
| THIS WILL BE DOCUMENTED AND RECORED FOR 6 YEARS.ANY CONFLICT OF INTENT POLICY WILL BE |
| DESCRIBE ON EACH ARRAGMENT IN WRITTING. |
| 4-A PERSSON WHO CAUSE ANY INJURY TO A PROPERTY OR ANY ASSETS IS AGAINST THE LAW AS "INTEN |
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E. If amending or adding additional Articles, enter change(s) here:

| The date of each amendment(s) ad date this document was signed. | april twenty three of two thousand eighteen option: | , if other than the |
|--|--|-------------------------|
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this blo | (no more than 90 days after amendment file date) ck does not meet the applicable statutory filing requirements, this date wil | ll not be listed as the |
| document's effective date on the Dep | | |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ■ The amendment(s) was/were ac was/were sufficient for approva | opted by the members and the number of votes cast for the amendment(s) l. | i |
| ☐ 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 04/23/2018 | the state of the s | |
| Signature | CHIN! | |
| have not bee | man or vice charman of the board, president or other officer-if directors in selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary) | |
| | Claudio A. Toledo (Typic or printed name of person signing) | |
| | MESIOCITY | |
| | (Title of person signing) | |