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Office Use Only

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PILED 2010 JUN 26 PH 2: 24 SECRETARY DE STATE

C. GOLDEN

JUN 2 8 2018

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: MINISTERIO CRISTIANO AGAPE

Name of Corporation

DOCUMENT NUMBER: N18000001550

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOSE HIDALGO

Name of Contact Person

MINISTERIO CRISTIANO AGAPE

Firm/Company

851 NW 2ND ST APT 4

Address

MIAMI FL 33128

City/State and Zip Code

josejohu@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE HIDALGO

,954

6487763

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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



April 25, 2018

JOSE HIDALGO 851 NW 2ND STREET APT. 4 MIAMI, FL 33128

SUBJECT: MINISTERIO CRISTIANO AGAPE INC

Ref. Number: N18000001550

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 318A00008487

www.sunbiz.org

District AG ... DO DOW 0005 W. U. J. ... The street of the



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 2, 2018

JOSE HIDALGO 851 NW 2ND STREET APT. 4 MIAMI, FL 33128

SUBJECT: MINISTERIO CRISTIANO AGAPE INC

Ref. Number: N18000001550

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 318A00004294

SECRETARY OF STATE

Articles of Amendment to Articles of Incorporation

FILED

2018 JUN 26 PM 2: 24

MINISTERIO CRISTIANO AGAPE INC
(Name of Corporation as currently filed with the Florida Dept. of State)

N18000001550

Pursuant to the provisions of section 617,1006. Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the c	corporation:
NIA	The new
name must be distinguishable and contain the word " "Company" or "Co," may not be used in the name.	"corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable	de: 851 NW 2 nd st
(Principal office address <u>MUST BE A STREET AD</u>	APTH4
	Miami FL 33128
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	ox) N/A
D. If amending the registered agent and/or registenew registered agent and/or the new registered	ered office address in Florida, enter the name of the d office address:
Name of New Registered Agent: _	Wilfredo Maldonado
	Wilfredo Maldonado 851 NW Znd St, APT:#4
<u>New Registered Office Address</u> :	(Florida street address)
_	Miani Elorida 33128 (City) (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	egistered Agent: I am familiar with and accept the obligations of the position.
	Willreds Maldonado
	Signature of New Registered 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.

X Change X Remove X Add		<u>Doe</u> Jones <u>Smith</u>	
Type of Action (Check One)	Title	Name	Address
1) Change Add Remove	<u>PT</u>	JOSE HIDALGO	851 NW 2nd St APT #4 Miani FL 33128
2) Change Add	PT	WIIFREDO MALDONADO	851 NW 2 nd st APT#4
Remove 3)ChangeAdd		· · · · · · · · · · · · · · · · · · ·	Miani FL 33128
Remove 4) Change Add			
Remove 5) Change Add		<u>. </u>	
Change Add Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)					
 						
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The date of each amendment(s) adoption: $02-24\cdot20/8$ late this document was signed.	, 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 block does not meet the applicable statutory filing requirements, this date will not locument's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/we're 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.	
Signature 06-21-12018	
(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)	
JOSE HIDAGO	
(Typed of printed name of person signing)	
PRESIDENT.	
(Vitle of person signing)	