118000004008

(Re	questor's Name)	
(Add	dress)	
(Ad	dress)	· ·
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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SECRETANT OF STATE

Anund Manuchs

JUL 25 2018

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION: MISSIONUY	ies In A	ction	In wiporated
DOCUMENT NU	MBER: N 18 000000	4008		
	es of Amendment and fee are subm			
	respondence concerning this matter	_		
	•			
<u>Laisy</u> I		·		
	(Name of Contact Per	son)	
	-	(Firm/ Company)	. ··-	
1510	NW 159 Are			
	130 130 Mac	(Address)		
~	O			
ten	Howke Pines, Fl		1.	
		City/ State and Zip C		
Lovessus@	GOI · Com E-mail address: (to be used)			
	E-mail address; (to be used)	for future annual repo	rt notification)
For further information	tion concerning this matter, please c	all:		
Daisy-	D192	at	954	673-2037
	(Name of Contact Person)		Area Code)	(Daytime Telephone Number)
Enclosed is a check	for the following amount made pay	able to the Florida Di	epartment of S	itate:
s35 Fill	ing Fee □\$43.75 Filing Fee & □ Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
$\frac{2}{3}$	lailing Address mendment Section		<u>et Address</u> Indment Section	an
1)	ivision of Corporations	Divi	sion of Corpo	
	O. Box 6327 allahassee, FL 32314		on Building L'Executive Co	enter Circle
·			ahassee, FL 31	



July 6, 2018

DAISY DIAZ 1510 NW 159 AVE PEMBROKE PINES, FL 33028

SUBJECT: MISSIONARIES IN ACTION INCORPORATED

Ref. Number: N18000004008

We have received your document for MISSIONARIES IN ACTION INCORPORATED and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

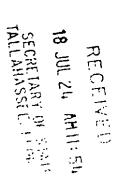
Bylaws are not filed with this office. Please retain them for your records.

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.

Letter Number: 518A00014001

Irene Albritton Regulatory Specialist II



Articles of Amendment

Articles of Incorporation

1.1	υf	
Missionaries In Ac	tion Incom	oxa ted
(Name of Corporation as cu		
000000P111	4008	
(Document S	Sumber of Corporation (if k	nown)
Pursuant to the provisions of section 617,1006, Florida Statendment(s) to its Articles of Incorporation:	tatutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
HEIROG HANGS IN A name must be distinguishable and contain the word "cor" "Company" or "Co." may not be used in the name.	Ction Inc poration" or "incorporated	The new I" or the abbreviation "Corp," or "Inc "
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDR</u>	ESS)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		2018 JUL 24 SECRE JUL 24 FALL MASS
D. If amending the registered agent and/or registered new registered agent and/or the new registered off Name of New Registered Agent:		enter the name of the
New Registered Office Address:	(F)	orida street address)
	<u>-</u> .	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I a		the obligations of the position
	Signature of New Regist	ered 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	\overline{V} Mi	nn Doe ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) <u>X</u> Change	P. F.	Daisy Digz	1510 NW 159 ALL
Add			Pemboke Pines, F1 330 28
Remove			
2) Change	<u>S</u> _	Marlene Acanda	5785 SW 160 Aue
X Add			South West Runches
Remove			WEST FL, 33331
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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late this document was signed.	in inc
Effective date if applicable: 7/23/18	
(no more than 90 days after amendment file date)	
Note: 11'the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the locument's effective date on the Department of State's records.	ıc
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes east 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.	
Dated 7/16/18	
Signature Olos	
(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)	
Daisy Daz	
(Typed or printed name of person signing)	
President	
(Title of person signing)	