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TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION:	dad de Atención a la	Familia Extendio	la 		
DOCUMENT NUMBER:	550				
The enclosed Articles of Amendment an					
Please return all correspondence concern	ing this matter to the	following:			
Alfonso E. Velandia					
	(Name o	of Contact Person	1)		
Comunidad de Atencón a la Familia Exte	endida				
	(Fir	m/ Company)		<u> </u>	
1869 Montgomery Bell Rd.					
		(Address)		• • • • • • • • • • • • • • • • • • • •	
Wesley Chapel Fl. 33543					
	(City/ St	ate and Zip Cod	e)		_
Evelandia@Cafechurch.cc					
E-mail addres	s: (to be used for futur	re annual report	notification)	
For further information concerning this n	natter, please call:				
Alfonso E. Velandia			3		
(Name of Co	ontact Person)	(Ar	ea Code)	(Daytime Telephone Number)	
Enclosed is a check for the following amo	ount made payable to	the Florida Depa	rtment of S	State:	
		ied Copy tional copy is	Certifi Certifi	O Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address Amendment Section			Address ment Secti	on	

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment to Articles of Incorporation of

Comunidad de Ateneron a la Familia Extendida		<u>.</u>		
(Name of Corporation	as currentl	y filed with the Flor	ida Dept. of State)	
N18000004550				
(Docum	nent Number	of Corporation (if ki	nown)	
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statutes	, this <i>Florida Not Fo</i>	r Profit Corporation adopts th	e following
A. If amending name, enter the new name of the	corporatio	<u>n:</u>		
N/A				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		on" or "incorporated	" or the abbreviation "Corp."	
B. Enter new principal office address, if applica	hle	N/A		
(Principal office address MUST BE A STREET A			:	2019
	-			<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				ا ال
		N/A		
(<u> </u>			9: 54
	-			_ <u></u>
		_		
D. If amending the registered agent and/or registered agent and/or the new registered			enter the name of the	
Name of New Registered Agent:	N/A			
		(Fl	orida street address)	
New Registered Office Address:				
	N/A		, Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing B hereby accept the appointment as registered agent			the obligations of the position	
_		CM D	1.4	
	SIP	nauure oi New Keeist	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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
l) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove			
3) Change		N/A	
Add			
Remove			
		N/A	
4) Change		_	
Add Remove			
5) Change		N/A	
Add			
Remove			
		N/A	
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Article III: the specific purpose for which this corporation is organized is:				
OF THE LIVING GOD; AND TO PROVIDE TEO THERAPEUTIC FAMILY COUNSELING TO ANY				
INDIVIDUAL IN NEED.				

	APKII, 25, 2018	
	he date of each amendment(s) adoption:	, if other than the
	APRIL 23, 2018 ffective date if applicable:	
	(no more than 90 days after amendm	ent file date)
	ote: If the date inserted in this block does not meet the applicable statutory fil ocument's effective date on the Department of State's records.	ing requirements, this date will not be listed as the
Ado	doption of Amendment(s) (<u>CHECK ONE</u>)	
	The amendment(s) was/were adopted by the members and the number of vowas/were sufficient for approval.	otes cast for the amendment(s)
	There are no members or members entitled to vote on the amendment(s). I adopted by the board of directors.	The amendment(s) was/were
	Dated APRIL 25, 2018	
	Signature /////	
	(By the chairman or vice chairman of the board, presider have not been selected, by an incorporator – if in the ha other court appointed fiduciary by that fiduciary)	
	ALFONSO E. VELANDIA	
	(Typed or printed name of po	erson signing)
	PRESIDENT	
	(Title of person s	iunino)