## N19000001393

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## COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: 1900000 1393 DOCUMENT NUMBER: \_\_\_ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Mary Ann Martinez
(Name of Contact Person) (Firm/ Company) 32917 Pez Landing Ln
(Address) Wesley (hapel Florida 33543)
(City/State and Zip Code) iglesia 4PTS @ gmail. (um E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Mary Ann Wartines at 813 532-0043

(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:

(Additional copy is enclosed)

□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation of

Iglesia	AMS. Corp.
(Name of Corporation as currently filed with the F	lorida Dept. of State)
N 19000	50 1393
	t Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the co	orporation:
Centro de Adoración	Palabra Jesus el Rey, Curp. The new corporation "or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co," may not be used in the name.	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	e: NA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	A M
D. If amending the registered agent and/or register new registered agent and/or the new registered  Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
_	, Florida
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	ristered Agent: I am familiar with and accept the obligations of the position.
	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.

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)	Title	Name	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3 ) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add	-		
Remove			
6) Change Add			
Remove			
E. If amending or additional she	ng additi ets, if nec	onal Articles, enter change(s) here: essary). (Be specific)	
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The date of each amendment(s) adoption:	ı	8/7/2024 8/7/2024		, if other than the
date this document was signed.		- \ - \ \		
Effective date if applicable:		8 7 2024  Ofter amendment file date,		
Note: If the date inserted in this block does a document's effective date on the Department	of State's records.	le statutory filing requirer	nents, this date will not	be listed as the
Adoption of Amendment(s)	CHECK ONE)			
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the	e number of votes cast for	the amendment(s)	

72 T	here are no mem dopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
	Dated	8 7 2024
	Signature	for fact
	,	(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)
		Mary Ann Martinetz (Typed or printed name of person signing)
		(Typed of printed name of person signing)
		Vice President
		(Title of person signing)