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TO: Amendment Section Division of Corporations

lglesia Bautista F NAME OF CORPORATION:	Renacer Key West Inc			
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are	submitted for filing.			
Please return all correspondence concerning this n	natter to the following:			
Newton Briones				
	(Name of Contact Perso	n)	· · · -	
Iglesia Bautista Renacer Key West Inc				
	(Firm/ Company)			
1659 Reodan Court No 4				
	(Address)	<u>-</u> _		
Key West FL 33040				
	(City/ State and Zip Cod	le)		
newtonbriones705@hotmail.com				
E-mail address: (to be u	used for future annual report	notification	n)	
For further information concerning this matter, ple	ease call:			
Marlen Herrera	30 at	5	647-8866	
(Name of Contact Per		rea Code)	(Daytime Telephone Number)	_
Enclosed is a check for the following amount mad	e payable to the Florida Dep	artment of	State:	
☐ \$35 Filing Fee		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address		Address		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Iglesia Bautista Renacer Key West Inc

(Name of Corporation as currently filed with the Flo	orida Dept. of State)	
(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 I	For Profit Corporation adopts the following
A. If amending name, enter the new name of the con	rporation:	
Iglesia Biblica Renacer Key West Inc		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporat	
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADD.	<u>RESS</u>)	. •
		
C. Enter new mailing address, if applicable:	ν.	
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
		
D. If amending the registered agent and/or registere	ed office address in Florid	a, enter the name of the
new registered agent and/or the new registered o		
Name of New Registered Agent:		
		Florida street address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi		and a skill said an afak a a said a
I hereby accept the appointment as registered agent. I	am jamiliar wiin and acce	oi ine oonganons oj ine posmon.
	Signature of New Regi	stered 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: XChange X Remove X Add	PT John Do V Mike Jo SV Sally Sr	nes en es	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>S</u>	Marlen Herrera	6709 Shrimp Rd Key West FL 33040
× Remove			
2) Change Add	<u>T</u>	Niola Toledo	5501 3rd Ave Apt 219 Key West FL 33040
X Remove	<u>T </u>	Marlen Herrera	6709 Shrimp Rd Key West FL 33040
4) Change Add	<u>S</u>	Belkis Dominguez	5501 3rd ave Apt 265 Key West FL 33040
Remove			
5) Change Add			
Remove			
δ) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
			

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The date of each amendment(s) adoption:date this document was signed.	. if other than the
Effective date if applicable: (no more than 90 days after amendment)	es Gladata)
(no more than 90 days after amename)	n pre uare)
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory fill document's effective date on the Department of State's records.	ng requirements, this date will not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

Dated	May 12, 2025
Signature	
	(By the finairman 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)
	Newton Briones
	(Typed or printed name of person signing)

(Title of person signing)