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TO: Amendment Section Division of Corporations

NAME OF CORPORATI	APOSENTO CRIST	TANO LUTZ INC		
	N19000011208			
DOCUMENT NUMBER:		 		
The enclosed Articles of Ar	nendment and fee are sub-	mitted for filing.		
Please return all correspond	lence concerning this matte	er to the following:		
ENGELBERT NIEVES				
		(Name of Contact Pe	erson)	
IGLESIA NUEVOS COMI	IENZOS INC			
	.—.—.—.—.—.—.	(Firm/ Company	·)	
10141 WOOD DUCK DR				
		(Address)		, , , , , , , , , , , , , , , , , , ,
NEW PORT RICHEY . FL	. 34654			
		(City/ State and Zip C	Code)	
engelbert _nieves@ yahoo.	com			
<u> </u>	e-mail address: (to be usee	for future annual rep	ort notification	1)
For further information con	cerning this matter, please	call;		
ENGELBERT NIEVES		at	813	334-8968
	(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	ayable to the Florida I	Department of	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
\$4 odline	.	C+ .		

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 to Articles of Incorporation of

APOSENTO CRISTIANO LUTZ INC

(Name of Corporation as currently filed with the Florida	Dept. of State)	
N19000011208		
(Document Nun	iber of Corporation (if know	n)
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	utes, this Florida Not For Pr	ofit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:	
IGLESIA NUEVOS COMIENZOS INC		The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorporated" or	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>S</u>)	
		~]
	· · · · · · · · · · · · · · · · · · ·	· ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
		<u>r.)</u>
D. If amending the registered agent and/or registered of		er the name of the
new registered agent and/or the new registered office	address:	
Name of New Registered Agent: N/A		
	(Florida	street address)
New Registered Office Address:		
	·	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f		obligations of the position.
	MIA	
	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 Doc 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 Doc, 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 Sı	ones	
Type of Action (Check One)	Title	<u>Name</u>	Address
Change Add	VOCAL.	PEREZ, IVONNE	3613 FYFIELD CT LAND O LAKES, FL 34638
x Remove			
2) Change _x Add	VP	NIEVES, SHAULA	10141 WOOD DUCK DR NEW PORT RICHEY ,FL 34654
Remove 3) × Change Add Remove	PRES	ENGELBERT NIEVES	10141 WOOD DUCK DR NEW PORT RICHEY, FL 34654
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			·
(attach additional shee		cles, enter change(s) here: (Be specific)	
N/A			
			

ν/A
The date of each amendment(s) adoption: ρ , if other than date this document was signed.
· · · · · · · · · · · · · · · · · ·
date this document was signed. Effective date if applicable: (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 be listed as if document's effective date on the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

	10/19/2020
Dated	
Signatur	e
	(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)
	ENGELBERT NIEVES
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were