## 120000013702

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(Address)	
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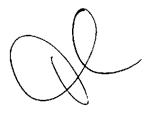


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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>Iglesia</u> 1	Gracia y Gloria Deltona
DOCUMENT NUMBER: N 2000 00 13	3702
The enclosed Articles of Amendment and fee are submit	ted for filing.
Please return all correspondence concerning this matter to	o the following:
T Luis OBRAC	
(8)	fame of Contact Person)
	200 <b>200 200</b> 200 200 200 200 200 200 200 200
	(Firm/ Company)
1633 Saxton Blu	(Firm/ Company)  1d.  (Address)  725
	(Address)
Deltona FL 32	725
(C	ity/ State and Zip Code)
icag deltina @ sma E-mail address to boused to	r future annual report notification)
For further information concerning this matter, please cal	II:
Milagnos Crun	at 407 - 803 - 1734  (Area Code) (Daytime Telephone Number)
(Name of Contact Derson)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payal	ble to the Florida Department of State:
(	\$43.75 Filing Fee &  Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee Fl 32314	2.115 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **Articles of Amendment**

to
Articles of Incorporation of

Iglosia Grad	ic 4	Coloria	Detala
(Name of Corporation as currently filed with the Florida De	pt. of State)	<del> </del>	
(Document Number	of Corporation (if k	nown)	<del></del>
	·		
Pursuant to the provisions of section 617.1006, Florida Statutes, amendment(s) to its Articles of Incorporation:	this Florida Not Fe	or Profit Corporation a	dopts the following
A. If amending name, enter the new name of the corporation	<u>n:</u>		
name must be distinguishable and contain the word "corporatio" Company" or "Co." may not be used in the name.	m" or "incorporated	d" or the abbreviation	The new "Corp." or "Inc."
B. Enter new principal office address, if applicable:			23
(Principal office address <u>MUST BE A STREET ADDRESS</u> )			<b>3</b>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			10 PM 12: 24 AHNSSEE, FL
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office adented of New Registered Agent:		nenter the name of the	<u> </u>
<u> 230</u> 1	' (Asbury	KOL.	
New Registered Office Address:	H.	lorida street address)	
De	<u>Itona</u>	, Florida (Zip (	, <u>3213 8</u> Code)
No. 10 Control of the			
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I an Yami	tiar with and accept	the obligations of the p	

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>V</u> <u>Mike</u>	Doe 2 Jones 2 Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	Vical	Richard Colon	2645 Howland Blvd Deltona FL 37738
Remove			
2) Change Add			ZOZNA TI
Remove 3 ) Change Add Remove			25.0
4) Change Add			SSEE STATE
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
	dding additional A sheets, if necessary	Articles, enter change(s) here:  ). (Be specific)	
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	2023
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	333 30 7 10 7 10 7 10 7 10 7 10 7 10 7 10 7 1
	PH 12: 21 SSEE, FL
The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:  (no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this dadocument's effective date on the Department of State's records.	ite will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	

The amendment(s) was/were adopted by the members and the number of votes cast 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 5 10 23
Signature  (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)
Madeline Ruiz
(Typed or printed name of person signing)
Treasurer

(Title of person signing)

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