N21 0000004309

| (Re | questor's Name) | |
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| (Ad | dress) | |
| (Ad | dress) | - |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to | • | |
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Office Use Only



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2022 FEB IL AM II: L2
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, Ft. 32314

| NAME OF CORPORATION: | VANGELICA MON | TE DE ISRAI | IL EFESIOS 2:20 #2 INC. |
|--|--|--|--|
| DOCUMENT NUMBER: | N210000 | 04309 | |
| | | | |
| The enclosed Articles of Amendment and fee are subm | naed for tunig. | | |
| Please return all correspondence concerning this matter | to the following: | | |
| ORL | ANDO CARRASOL | JILLO | |
| | (Name of Contact Pe | rson} | |
| OC C | CONSULTING FIRE | M INC. | |
| | (Firm/ Company |) | |
| 8779 | 5 20TH STREET | LOT 324 | |
| | (Address) | | |
| VE | ERO BEACH FL | 32966 | |
| | (City/ State and Zip C | lode) | |
| occons | SULTINGFIRM@YA | AHOO.COM | |
| E-mail address: (to be used | for future annual rep | ort notification | <u> </u> |
| For further information concerning this matter, please | eall: | | |
| ORLANDO CARRASQUILLO | at | 561 | 542-5465 |
| (Name of Contact Person | | | (Daytime Telephone Number) |
| Enclosed is a check for the following amount made pa | yable to the Florida l | Department of | State: |
| ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status | ■\$43-75 Filing Fee Certified Copy (Additional copy i enclosed) | Certif s Certif | 0 Filing Fee icate of Status ied Copy tional Copy is osed) |
| Mailing Address Amendment Section Division of Corporations | Ar | reet Address nendment Sect vision of Corpo | |

Clifton Building

2661 Executive Center Circle

Tallahassee, Ft. 32301

Articles of Amendment to Articles of Incorporation of

FILED

IGLESIA EVANGELICA MONTE DE ISRAEL EFESIOS 2:20 #2 INC.

2022 FEB 14 AM 11: 42

| (Name of Corporation as cur | rently filed with the Florida Dept. of State) | SECRETARY OF STATE | |
|--|---|----------------------|--|
| N21000004309 | | TALLAHASSEE, FL | |
| (Document Nu | imber of Corporation (if known) | | |
| Pursuant to the provisions of section 617,1006. Florida Statumendment(s) to its Articles of Incorporation: | atutes, this Florida Not For Profit Corporation (| idopts the following | |
| A. If amending name, enter the new name of the corpo | ration: | | |
| , | CA MONTE DE ISRAEL #2 INC. | The new | |
| name must be distinguishable and contain the word "corp "Company" or "Co," may not be used in the name | oration" or "incorporated" or the abbreviation | "Corp." or "Inc." | |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u> | 288) | | |
| | | | |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | | | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered offi | office address in Florida, enter the name of thice address: | <u> </u> | |
| | | | |
| | (Florida sircet address) | | |
| New Registered Office Address: | | | |
| | . Floric | la | |
| | . Floric (City) (Zip | (Code) | |
| New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I at | ered Agent: m _. familiar with and accept the obligations of the | · position. | |
| | Signature of New Registered Agent, if change | ng | |

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add | PT John D V Mike J SV Sally S | <u>ones</u> | |
|---|---|-------------|---------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change Add | | | |
| Remove | | | |
| 2) Change Add | | | |
| Remove 3 Change | | | |
| Add Remove | | | |
| 4) Change | | | |
| Remove | | | |
| 5) Change Add | | | |
| Remove | | | |
| 6) Change Add | | | |
| Remove | | | |

| . If amending or adding additional Artic (attach additional sheets, if necessary). | (Be specific) |
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| The | date of each amendment(s) add | ption: | , if other than the |
|--------------------|---|---|----------------------|
| | this document was signed. | | |
| Effe | ective date <u>if applicable</u> : | | |
| | | (no more than 90 days after amendment file date) | |
| <u>Not</u> doct | e: If the date inserted in this blocument's effective date on the Dep | ck does not meet the applicable statutory filing requirements, this date will reartment of State's records. | not be listed as the |
| Ade | option of Amendment(s) | (<u>CHECK ONE</u>) | |
| | The amendment(s) was/were ad was/were sufficient for approva | opted by the members and the number of votes cast for the amendment(s) \cdot \cdot \cdot . | |
| | There are no members or membadopted by the board of directo | ters entitled to vote on the amendment(s). The amendment(s) was/were rs. | |
| | Dated | 1/05/2021 | |
| | Signature | man or vice chairman of the board, president or other officer-if directors | |
| | have not bee | en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary) | |
| | | JOSE A. DUBON-GARCIA | |
| | - | (Typed or printed name of person signing) | |
| | | PRESIDENT | |
| | | (Title of person signing) | |
| | | | |