# N21000005258

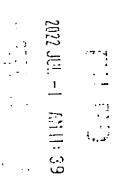
(Requestor's Name)
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PICK-UP WAIT MAIL
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(Document Number)
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# **COVER LETTER**

TO: Amendment Section Division of Corporations		
·	GELICA BETHEL FELLOWSHIP INC	
NAME OF CORPORATION:		
N21000005258		
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are suf-	bmitted for filing.	
Please return all correspondence concerning this mat ARIEL M RAMIREZ HERNANDEZ	tter to the following:	
	(Name of Contact Person)	
	(Firm/ Company)	
2943 BONITA CIRCLE		
	(Address)	
KISSIMMEE, FL. 34744		
	(City/ State and Zip Code)	
arielrh68@gmail.com		
E-mail address: (to be use	ed for future annual report notification)	2012
For further information concerning this matter, pleas	ex coll-	-
Ariel M Ramirez Hernandez	(497) 280 (495	022 JUL -1
	at	
(Name of Contact Perso	n) at (Area Code) (Daytime Telep	hone Number)
Enclosed is a check for the following amount made p	payable to the Florida Department of State:	: :3 9
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		

## **Mailing Address**

Amendment Section Division of Corporations P.O. Box 6327

#### Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

Enclosed)

### Articles of Amendment to Articles of Incorporation of

IGLESIA EVANGELICA BETHEL FELLOWSHIP INC

(Name of Corporation as currently filed with the Florid N21000005258	da Dept. of State)	
(Document No	imber of Corporation (if k	nown)
Pursuant to the provisions of section 617,1006. Florida Sta amendment(s) to its Articles of Incorporation:	ntutes, this <i>Florida Not Fe</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	oration:	
		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporated	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2027
		1
D. If amending the registered agent and/or registered		enter the name of the
new registered agent and/or the new registered offi	ce address:	<del></del> ట
Name of New Registered Agent:		
	ı (F	lorida street address)
New Registered Office Address:	and an extraction and	
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe		e de la chilla del casa d'Alexan activida
I hereby accept the appointment as registered agent. I an	н јатшаг жип апа ассері	те оонданонх ој те роѕшоп.
	Signature of New Regist	ered 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 = ChiefExecutive 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	PT         John De           V         Mike Jo           SV         Sally St	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>T</u>	MOISES G RAMIREZ HERNANDEZ	
X Remove			
2) Change Add	<del></del>		
Remove Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. <u>If amending or addi</u> (attach additional she	ing additional Ar rets, if necessary).	ticles, enter change(s) here: (Be specific)	

		<del>.</del>
·		
		<del></del>
	06/28/2022	
The date of each amendment(s) adoption: date this document was signed.		_, if other than the
Effective date if applicable:		
(n	o more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not tof State's records.	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.

06/28/2022	
00/28/2022	
Dated	
Signature Ariel	N
(By the chair have not be	man or vice chairman of the board, president or other officer-if directors on selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
ARIELA	I RAMIREZ HERNANDEZ
	(Typed or printed name of person signing)
	ENT