

**NZ1000012489**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H21000396638 3)))



H210003966383ABC5

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : PROFESSIONAL TAX PREPARATION LLC  
Account Number : I20210000081  
Phone : (407)933-4211  
Fax Number : (407)679-0387

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2021 OCT 26 PM 3:02

FILED

**COR AMND/RESTATE/CORRECT OR O/D RESIGN**

**IGLESIA PENTECOSTAL JAHOVA NISSI 2 INC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$35.00 |

OCT 27 2021

**S. PRATHEP**

2021 OCT 26 PM 3:42

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: IGLESIA PENTECOSTAL JAHOVA NISSI 2 INC

DOCUMENT NUMBER: N21000012489

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MANUEL A VILLALONGO

(Name of Contact Person)

IGLESIA PENTECOSTAL JEHOVA NISSI INC

(Firm/ Company)

2232 W COLUMBIA AVE

(Address)

KISSIMMEE FL 34741

(City/ State and Zip Code)

mnjle77@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MANUEL A. VILLALONGO

787

528-4925

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy is  
Enclosed)

**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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2021 OCT 26 PM 3:02

FILED

(Name of Corporation as currently filed with the Florida Dept. of State)

IGLESIA PENTECOSTAL JAHOVA NISSI 2 INC

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

IGLESIA PENTECOSTAL JEHOVA NISSI 2 INC

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

6604 ARLINGTON EXPRESSWAY

JACKSONVILLE, FLORIDA

32211

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5823 HARRIS AVE

JACKSONVILLE, FLORIDA

32211

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

N/A

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

Signature of New Registered Agent, if changing

N/A

[illegible]

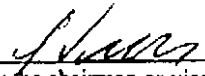
Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

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 10/25/2021

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)

MANUEL A. VILLALONGO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILED

2021 OCT 26 PM 3:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA