## N22000005892

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## **COVER LETTER**

\* TO: Amendment Section Division of Corporations

NAME OF CORPORATION		VTECOSTAL DEL EVA	ANGELIO I	DE JESUCRISTO I	NC.
	N22000005892				
DOCUMENT NUMBER:					
The enclosed Articles of An	nendment and fee are subr	mitted for filing.			
Please return all corresponde	ence concerning this matte	er to the following:			
Epifanio Fontanez					
		(Name of Contact Perso	n)		<del></del>
N/A					
		(Firm/ Company)			
7008 US HWY 19					
		(Address)			<del></del>
New Port Richey, FL 34652	2				
· · · · · ·		(City/ State and Zip Cod	le)	, <u></u>	
iglesiacasadesantidadmpej@	)gmail.com				
	-mail address; (to be used	for future annual report	notification	1)	
For further information conc	erning this matter, please	call:			
Epifanio Fontanez		73 at	.7	5696295	
	(Name of Contact Person)		rea Code)	(Daytime Telepho	one Number)
Enclosed is a check for the f	following amount made pa	iyable to the Florida Dep	artment of	State:	one Number)
<b>≘</b> \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	D Filing Fee icate of Status red Copy tional Copy is used)	- - - -
Division o P.O. Box (	nt Section of Corporations	Ameno Divisio The C			. (

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

MOVIMIENTO	PENTECOSTAL	DELEVANCELI	IO DE JESTICRISTO INC

(Name of Corporation as currently filed with the	e Florida i	Jept. of State)		
N22000005892		200		
(Docum	nent Numb	er of Corporation (if kn	own)	
Pursuant to the provisions of section 617,1006, Flo amendment(s) to its Articles of Incorporation:	rida Statut	es, this <i>Flo<b>rida Not For</b></i>	Profit Corporation adopts the fo	llowing
A. If amending name, enter the new name of the	e corporat	<u>ion:</u>		
N/A			T	he new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		tion" or "incorporated"		
B. Enter new principal office address, if applica	ble:	N/A		
(Principal office address MUST BE A STREET A		) <sub>N/A</sub>		,
		N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u> )	N/A		<u> </u>
		N/A		
		N/A		
D. If amending the registered agent and/or regi			enter the name of the	
new registered agent and/or the new register		<u>iddress:</u>		
Name of New Registered Agent:	N/A			<u> </u>
	N/A		<b>-</b> ₹.*	
N. D. Jan J. J. Off C. I. J. C.		(Flo.	rida street address)	<del>- 57</del>
New Registered Office Address:			NUA.	
	N/A		, Florida NA	<del></del>
		(City)	(Zip Coxle)	$\dot{\omega}$
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			he obligations of the position.	သ
_				
	S	gnature of New Register	ed 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 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>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	PG	EPIFANIO FONTANEZ	7008 US HWY 19 NEW PORT RICHEY FL 34652
Remove 2) X Change Add	<u>st</u>	LESVIA M FONTANEZ	7008 US HWY 19 NEW PORT RICHEY FL 34652
Remove	<del></del>		
4)ChangeAdd			
Remove			
5) Change Add			
Remove			
6) Change Add			-
Remove			
E. If amending or add (attach additional she		Articles, enter change(s) here: v). (Be specific)	
N/A			

N/A	
N/A	<del></del>
<del></del>	······································
N/A	
N/A	
N/A	····
N/A	<del></del>
N/A	
The date of each amendment(s) adoption: 7/25/2022 date this document was signed.	, if other than the
Effective date <u>if applicable</u> : 7/28/2022	
(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 requiren document's effective date on the Department of State's records.	nents, this date 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 east for the amendment(s) was/were sufficient for approval.

Dated	N/A
Signatu	
	(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Epifanio Fontanez
	Epifanio Fontanez  (Typed or printed name of person signing)