## N2200014362

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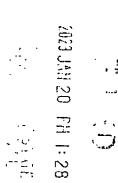
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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JAN 2 0 2023



## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Iglesia Kestaurado Por Su Sangre, Inc. DOCUMENT NUMBER: <u>**N22000014362**</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Rene A. Borrero
(Name of Contact Person) (Firm/ Company) 10320 Eastern Lake Ave. Suite 103
(Address)

Orlando, Florida 33817
(City State and Zip Code) rborrero 88 29 mail. com
ail address: (to be used for future annual report notification) For further information concerning this matter, please call: Rene A. Borrers at (407) 694-1327 (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: S52.50 Filing Fee ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee &

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Amendment Section Division of Corporations P.O. Box 6327

Certificate of Status

Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Certificate of Status

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Enclosed)

Tallahassee, FL 32303

## **Articles of Amendment**

to Articles of Incorporation of

			rticles of Inc of			ė-		••
	Iglesia	Restaurado	por	Su	Sar	ogre	Inc.	م <sup>غ</sup>
(Name	e of Corporation as cu	rrently filed with the Flor	rida Dept. o	f State)		<del>ال درون کا ا</del>	320 Pii	1:28
		N 22 00 00	1436	2				* * *
		(Document N			on (if kno	own)		
	ant to the provisions of s lment(s) to its Articles of	section 617,1006, Florida S f Incorporation:	Statutes, this	Florida	Not For	Profit Corpo	ration adopts	the following
A. <u>If:</u>	amending name, enter Iglesië	Res Faura	dos	Por	Su	Sangr	e Inc	• The new
name i <u>"Com</u>	must be distinguishable pany" or "Co." may no	and contain the word "cor t be used in the name.	rporation" o	or "incorp	porated"	or the abbre	viation "Corp	)," or "Inc."
		e address, if applicable: ST BE A STREET ADDR	<u>RESS</u> )					
C. <u>E</u> i	nter new mailing addr	ess, if applicable:						<del></del>
(M	failing address <u>MAY B</u>	<u>E A POST OFFICE BOX</u>						
	w registered agent and	ed agent and/or registered l/or the new registered of w Registered Agent:			lorida, e	nter the nam		
	<u>New Regis</u>	tered Office Address:			(Flor	ada street addres	v	
						,	Florida	
		nature, if changing Regist out as registered agent. I d		: :	accept th	ne obligations	(Zip Code) of the positio	9H.
		<del></del>	Signatur	e of New	Register	ed Agent, if c	hanging	

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	PT         John D           V         Mike Jo           SV         Sally S	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) _X_ Change Add	<u>_</u> P	Rene A. Borrero	
Remove			
2) Change Add			
Remove 3 ) Remove Add Remove		· · · · · · · · · · · · · · · · · · ·	
4) Change Add	<del></del>		<u> </u>
Remove			
51 Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	ng additional Art ets, if necessary).	icles, enter change(s) here: (Be specific)	
	<u> </u>		
		·	
		· <del>-</del>	<del></del>
			<del>.</del>

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·		
	<del></del>	
The date of each amendment(s) add date this document was signed.	option: i	other than the
Effective date if applicable:	01-20 - 2023	
<del> </del>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the applicable statutory filing requirements, this date will not be l artment of State's records.	isted as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s).	

Dated	01-20-2023
Signature	Low A. Ban
	(By the chairman or vice chairman of the board, president or other officer-if directe have not been selected, by an incorporator – if in the hands of a receiver, trustee, to other court appointed fiduciary by that fiduciary)

President
(Title of person signing)