

N24 000 001 163

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(Address)

(Address)

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COVER LETTER

Amendment Section
Division of Corporations

NAME OF CORPORATION: ADBRAS ORLANDO, INC.

DOCUMENT NUMBER: N24000001163

Enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Pr. ILMAR ALVES PEREIRA

Name of Contact Person

AD LIFE CHURCH

Firm/ Company

360 S. MILITARY TRAIL

Address

DEERFIELD BEACH, FL 33442

City/ State and Zip Code

ADLIFECHURCH@OUTLOOK.COM

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

For further information concerning this matter, please call:

ILMAR ALVES PEREIRA at (954) 732-8185
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:

<input type="checkbox"/> \$35 Filing Fee	<input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	<input checked="" type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
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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

DBRAS ORLANDO, INC.

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

4000001163

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to Articles of Incorporation:

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

DBRAS MADUREIRA, INC.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Co.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

Enter new principal office address, if applicable:

*Principal office address **MUST BE A STREET ADDRESS***

3896 S. PLEASANT GROVE ROAD

INVERNESS, FL 34452

Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

3896 S. PLEASANT GROVE ROAD

INVERNESS, FL 34452

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 ILMAR ALVES PEREIRA

(Florida street address)

New Registered Office Address: 360 S. MILITARY TRAIL, DEERFIELD BEACH, Florida 33442
(City) (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

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☐ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
<input checked="" type="checkbox"/> Change	P	Bishop SAMUEL C. FERREIRA	106 MAGNOLIA LAKE
<input type="checkbox"/> Add			LONGWOOD, FL 32779
<input type="checkbox"/> Remove			
<input checked="" type="checkbox"/> Change	V.P	Bishop KEILA C. FERREIRA	106 MAGNOLIA LAKE
<input type="checkbox"/> Add			LONGWOOD, FL 32779
<input type="checkbox"/> Remove			
<input checked="" type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
<input checked="" type="checkbox"/> Change	T	Pr. ILMAR ALVES PEREIRA	8891 SW 16TH STREET
<input type="checkbox"/> Add			BOCA RATON, FL 33433
<input type="checkbox"/> Remove			
<input checked="" type="checkbox"/> Change	S	Pr. DILMO SANTOS	2763 METRO SEVILLA DR, 109
<input type="checkbox"/> Add			ORLANDO, FL 32835
<input type="checkbox"/> Remove			
<input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

ate of each amendment(s) adoption: OCTOBER/30/2024, if other than the
his document was signed.

ive date if applicable: OCTOBER/30/2024
(no more than 90 days after amendment file date)

If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
ment's effective date on the Department of State's records.

tion of Amendment(s) **(CHECK ONE)**

e amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder
ion was not required.

e amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s)
the shareholders was/were sufficient for approval.

e amendment(s) was/were approved by the shareholders through voting groups. *The following statement
ist be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

Dated OCTOBER/30/2024

Signature _____
(By a director, president or other officer – if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)

BISHOP SAMUEL C. FERREIRA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)