N25000009219

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

OCT was

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION	Casa de Reunion H2	!42, Inc.		_	
DOCUMENT NUMBER:	N25000009219				
The enclosed Articles of An	nendment and fee are sub-	mitted for filing.			
Please return all correspond	ence concerning this matt	er to the following:			
Luis R. Ortiz					
		(Name of Contact	Perso	n)	
Casa de Reunion H242, Inc					
		(Firm/ Compa	ny)		
3031 Panther Dr.					
	·	(Address)			
Lakeland, FL 33812					
	,	(City/ State and Zip	p Cod	e)	
titoltiz@gmail.com					
E	-mail address: (to be used	for future annual r	eport	notification	n)
For further information cond	cerning this matter, please	call:			
	Samuel Rodriguez		ıt	813	505-1115
	(Name of Contact Person			rea Code)	(Daytime Telephone Number)
Enclosed is a check for the f	following amount made pa	ayable to the Florida	a Dep	artment of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
	ent Section of Corporations	A D	Ameno Divisio	Address Iment Section of Corpo entre of T	rations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

	Articles of Amendment		
	to Articles of Incorporation		
<i>,</i>	of		4
Casa de Reunion H242, Inc.			202 Տե
Name of Corporation as currently filed with the Flo	 orida Dept. of State)		2025 AUG 18 SECKLIARY ALLAHASSE
N25000009219			AUG II LIAR HASS
(Document	Number of Corporation (i	if known)	- SEE 0 - SEE
Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:	-		4 1
A. If amending name, enter the new name of the con	rporation:		5 9
N/A			The new
name must be distinguishable and contain the word "co "Company" or "Co," may not be used in the name.	orporation" or "incorpore	ated" or the abbreviation "Corp.	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD		4.000	
C. Enter new mailing address, if applicable:			_
(Mailing address MAY BE A POST OFFICE BOX	<u>N/A</u>		
		-	
). If amending the registered agent and/or registere	ed office address in Flori	ida, enter the name of the	
new registered agent and/or the new registered o	ffice address:		
Name of New Registered Agent:	A		
New Registered Office Address:		(Florida street address)	
N/A	4	Placida	
	(City)	, Florida (Zip Code)	
	,	• •	
New Registered Agent's Signature, if changing Registered agent. I hereby accept the appointment as registered agent.		, Florida, Clip Code) (Zip Code) ept the obligations of the position	n.
 -	Signature of New Res	gistered 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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) N/A Change Add			
Remove			
2) N/A Change Add			
Remove 3) N/A Change Add Remove			
4) <u>N/A</u> Change Add			
Remove			
5) N/A Change Add			
Remove			
6) <u>N/A</u> Change Add			
Remove			
E. If amending or addin (attach additional shee		onal Articles, enter change(s) here: ssary). (Be specific)	
ARTICLE III PURPOSE			<u>-</u>
The purpose for which the	e corpora	tion is organized is: An evangelical church. Said c	rganization is organized exclusively for
the making of distribution	ı to organ	nizations that qualify as an organizations describe u	nder Section 501(c)(3) of the
Internal Revenue Code, o	or corresp	onding section of any future federal tax code. Min	istering the Word of our God the Father,
God The Son and God Th	e Holy S	pirit by preaching, teaching, and worshiping. Upon	the dissolution of the organization,

assets shall be distributed for one	or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue	<u>:</u>
Code, or corresponding section of	any future federal tax code, or shall be distributed to the federal government, or to a state	
or local government, for a public	purpose.	_
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		_
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		_
The date of each amendment(s) adate this document was signed.	adoption:, if othe	r than the
Effective date if applicable:	(no more than 90 days after amendment file date)	_ _
Note: If the date inserted in this b document's effective date on the D	lock does not meet the applicable statutory filing requirements, this date will not be listed department of State's records.	as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(s) val.	

.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Signature (By the chairman of 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)
Luis R. Ortiz
(Typed or printed name of person signing)
President / Senior Pastor

(Title of person signing)

TILED 2025 AUG 18 AM 8: 59