N47862

(Re	equestor's Name)	
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(Ad	Idress)	
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SECRETARY OF STATE

1/26/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Iglesia Fuente	de Salvacion Misionera	a, Inc.
DOCUMENT NUM	BER: N47862		· · · · · · · · · · · · · · · · · · ·
The enclosed Articles	s of Amendment and fee are sul	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
		. Juarez, CPA	
	(Name of	Contact Person)	•
	Accounting Sc	olutions of SWFL, Inc.	
	(Firm	n/ Company)	
	15051 S. Tan	niami Trail Suite 203	
···	(.	Address)	,
	Fort My	ers, FL 33908	
	(City/ Sta	te and Zip Code)	
***********	E-mail address: (to be use	d for future annual report notifica	ition)
For further information	on concerning this matter, pleas	e call:	
Mario E. Juarez,	CPA	at (239) 938-006	5
(Name	of Contact Person)		ne Telephone Number)
Enclosed is a check f	or the following amount made p	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)
Amer Divis P.O. 1	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

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2011 JAN 24 AM 9: 31

Iglesia Fuente de	Salvacion Misionera, Inc.	LOTT SAM 24 AM 36
(Name of Corporation as curr	ently filed with the Florida Dept. of S	SECRETARY OF STAT FALLAHASSEE.FLORI
	N47862	
(Document Nur	mber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, he following amendment(s) to its Articles of In		Profit Corporation adopts
A. If amending name, enter the new name of	of the corporation:	
The new name must be distinguishable and cabbreviation "Corp." or "Inc." "Company" o		ncorporated" or the
B. <u>Enter new principal office address, if app</u> Principal office address <u>MUST BE A STREI</u>		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		
D. If amending the registered agent and/or new registered agent and/or the new registered Agent:		enter the name of the
New Registered Office Address:	(Florida street address)	
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing the hereby accept the appointment as registere position.		cept the obligations of the
	Signature of New Registered 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)

, t

<u>Tițle</u>	, 1	<u>Name</u>	Address	Type of Action
D		Samuel Velez	326 SW 29th Lane Cape Coral, FL 33991	☑ Add □ Remove
D	-	Sandra Aguilar	510 NW 24th Terr. Cape Coral, FL 33993	[7] Add [7] Remove
	-			☐ Add ☐ Remove
E. If a	mendin:	g or adding additional Articles, ent	er change(s) here:	
(atta	ch addii	tional sheets, if necessary). (Be spe	ecific)	
<u> </u>				

The date of each amendment(s) adoption:
(date of adoption is required)
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
(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)
Tulio C. Cuello (Typed or printed name of person signing)
Tresident (Title of person signing)