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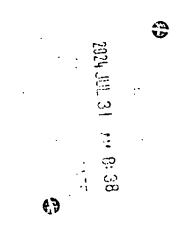
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COVER LETTER

TO: Amendment Section Division of Corporations

COMUNIDAD SIERVOS DE CRISTO NAME OF CORPORATION:	O VIVO, INC.	
N93000002317		
DOCUMENT NUMBER:		· · · · ·
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:	:	
GISELA ESPINAL		
(Name of Contact	Person)	
COMUNIDAD SIERVOS DE CRISTO VIVO, INC.		
(Firm/ Compa	iny)	*****
3100 NW 77 CT		
(Address)		
DORAL, FL 33122		
(City/ State and Zi	p Code)	
consejomiacscv@gmail.com		
E-mail address: (to be used for future annual)	report notification	n)
For further information concerning this matter, please call:		
GISELA ESPINAL	(305) at	542-9119
(Name of Contact Person)		(Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florid	a Department of	State:
□ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee Certificate of Status Certified Copy (Additional copy enclosed)	Certif y is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)

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

COMUNIDAD SIERVOS DE CRISTO VIVO, INC.

Number of Corporation (if kn	own)
Statutes, this Florida Not For	Profit Corporation adopts the following
rporation:	
	The new
orporation" or "incorporated	" or the abbreviation "Corp." or "Inc."
N/A	
RESS)	
	
n/A	
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DRIGUEZ, FRANCISCO, SI	(c)
00 NW 77 CT	GA CA
(Fio.	rida street address)
nR A I	33122
(CH)	(rap Code)
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am jamiliar win and accept t	ne obligations of the position.
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	Statutes, this Florida Not For poration: N/A RESS N/A N/A N/A O N/A O N/A O N/A O N/A O N/A O N/A N/A

If amending the Officers and/or Directors, en	enter the title and name of each officer/director being removed	d and title, name,
and address of each Officer and/or Director b		

(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 J SV Sally S	<u>ones</u>		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change Add	P	PUMAROL, DULCE M		
X Remove				
2) Change Add	<u>VTR</u>	ALONSO, ESTHER C		
X Remove 3) Change Add X Remove	D	BOLANOS, DESIREE		
4) Change Add	D	RODRIGUEZ, ISIDRO M		
x Remove				
5) Change Add	D	JURADO, LUZ ELENA D		
x Remove				
6) Change Add	<u>D</u>	SANCHEZ, GRISELDA D		
x Remove				
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
Type of Action	Title	Name	Address	
7) Change	P	ESPINAL, GISELA		
8) Change	DS	DELGADO, MARIA		
9) Add	V	ADAMES, JOSE M	3100 NW 77 CT	
			DORAL, FL 33122	

10) Add	TRD	MERCADO, JOSE D	3100 NW 77 CT	
			DORAL, FL 33122	
11) Add	D	SILVESTRE, MARILEYDIS	3100 NW 77 CT	
	-		DORAL, FL 33122	
12) Add	D	SUAREZ, YSABEL C	3100 NW 77 CT	
			DORAL, FL 33122	
13) Add	D	SANCHEZ, ROSSI	3100 NW 77 CT	
			DORAL, FL 33122	
NO MORE AMM	IEDMENTS AFTER	THIS LINE		
				
		· · · · · ·		
	=			
		······································		
The date of each date this document	amendment(s) adop	05/01/2024		, if other than the
Effective date if a	N/A			
		(no more than 90 days after amendment	file date)	

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

(CHECK ONE)

document's effective date on the Department of State's records.

Adoption of Amendment(s)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

adopted by the board of directors.
Dated July 20, 20,24
Signature Sioela Copinal
(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)
ESPINAL, GISELA
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	STO VIVO, INC.
N93000002317	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing	3 .
Please return all correspondence concerning this matter to the follow	ring:
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(Name of Cor	itact Person)
COMUNIDAD SIERVOS DE CRISTO VIVO, INC.	
(Firm/ Co	ompany)
3100 NW 77 CT	
(Add	ress)
DORAL, FL 33122	
(City/ State a	nd Zip Code)
consejomiacscv@gmail.com	
E-mail address: (to be used for future an	nual report notification)
For further information concerning this matter, please call:	
GISELA ESPINAL	(305) 542-9119
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
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☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Fil Certificate of Status	Copy Certificate of Status Il copy is Certified Copy

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Amendment Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303