# N930000004423

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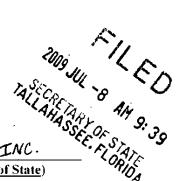
Amend + N/C
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### **COVER LETTER**

• TO: Amendment Section
Division of Corporations

NAME OF CORPO	DRATION: IGLESIA BAU	TISTA INDEPENDIENT	E
DOCUMENT NUM	IBER: N93000004423		
The enclosed Article	s of Amendment and fee are sub	omitted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	
		D BRAITHWAITE	<del></del>
	(Name of	Contact Person)	
	IGLESIA BAUTI	STA INDEPENDIENTE	
	(Firm	n/ Company)	
	15078	SW 56TH ST	
	(/	Address)	
	MIAM	II, FL 33185	
	(City/ Sta	te and Zip Code)	
		@AOL.COM	
	E-mail address; (to be use	d for future annual report notifica	ition)
For further informati	on concerning this matter, please	e call:	
ARXAPHAD BRAITHWAITE		at ( 305 ) 926-967	4
(Name of Contact Person)		(Area Code & Daytir	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)
Mailing Address  Amendment Section  Division of Corporations		Street Address Amendment Section Division of Corporation	ons
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Tallahassee, FL 32301	r Circle

#### Articles of Amendment to Articles of Incorporation of



## IGLESIA BAUTISTA INDEPENDIENTE, INC

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

#### N93000004423

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

IGLESIA BIBLIC ne new name must be distinguishable and conta phreviation "Corp." or "Inc." "Company" or "Comp		
previous Corp. or the Company or C	.o. may not be used in the num	<u>e</u> .
Enter new principal office address, if applica rincipal office address <u>MUST BE A STREET A</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	15078 SW 56TH	IST
	MIAMI, FL 3318	5
new registered agent and/or the new registere  Name of New Registered Agent:		<del></del>
No De Sand COC e All	/FI 11	
New Registered Office Address:	(Florida street address)	
New Registered Office Address:		, Florida
New Registered Office Address: ———————————————————————————————————	(Florida street address) (City)	, Florida (Zip Code)
ew Registered Agent's Signature, if changing R	(City) Registered Agent:	(Zip Code)
New Registered Office Address:  Ew Registered Agent's Signature, if changing Foundation as registered agestion.	(City) Registered Agent:	(Zip Code)

# 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)

<u>Name</u> Address **Type of Action** . Title D JUAN CARLOS NOVOA 16311 SW 96 TE ☐ Add ☑ Remove MIAMI, FL 33196 ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s)	adoption: JULY 51H, 2009
	(date of adoption is required)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for approx	adopted by the members and the number of votes cast for the amendment(s) val.
There are no members or me adopted by the board of directions.	mbers entitled to vote on the amendment(s). The amendment(s) was/were ctors.
Dated_JULY   Signature	6TH, 2009 Zai Hwaite
(By the	ne chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, o court appointed fiduciary by that fiduciary)
	ARXAPHAD BRAITHWAITE
-	(Typed or printed name of person signing)
	PRESIDENT
•	(Title of person signing)