

N94000004089

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

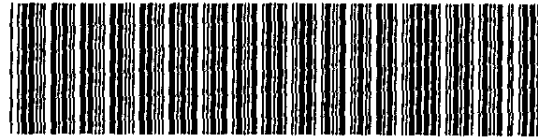
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FILED  
04 DEC 13 PM 4: 50  
CLERK OF COURT  
TALLAHASSEE, FLORIDA

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

FILED  
04 DEC 13 PM 4:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NAME OF CORPORATION: ASSEMBLEIA DE DEUS EM TAMPA BAY, INC.

DOCUMENT NUMBER: H94000007818

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANTONIO DA SILVA

(Name of Contact Person)

(Firm/ Company)

P.O. BOX 262107

(Address)

TAMPA, FL 33685-2107

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

ANTONIO DA SILVA

(Name of Contact Person)

at ( 813 ) 890-9084

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

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

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

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

(Document number of corporation (if known))

**NEW CORPORATE NAME (if changing):**

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

(continued)

The date of adoption of the amendment(s) was: 12/09/04

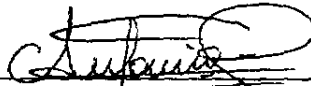
Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

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

- ☐ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signed this 9th day of December, 2004.

Signature



(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

ANTONIO DA SILVA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

**FILING FEE: \$35**