

Florida Department of State

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COR AMND/RESTATE/CORRECT OR O/D RESIGN MARANATHA COMMUNITY CHURCH ASSEMBLIES OF GOD, INC.

| Certificate of Status | 0 |
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Corporate Filing Menu

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COVER LETTER

| IU: Amenament Section |
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| Division of Corporations |
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| MARAN. | ATHA CUMMUNITY CHU | RCH ASSEMI | BLIES OF GOD INC |
|--|---|------------------------------|--|
| N9400004620 DOCUMENT NUMBER: | | | |
| The enclosed Articles of Amendment and fee | are submitted for filing. | | |
| Please return all correspondence concerning th | ais matter to the following: | | |
| | DORA CORONAL | 00 | |
| | (Name of Contact Pe | erson) | |
| | TREASURER | | |
| | (Firm/ Company | ·) | |
| | 10022-26 WEST MCNA | B ROAD | |
| | (Address) | | |
| | TAMARAC FL 333 | 21 | |
| | (City/ State and Zip | Code) | |
| | | | |
| E-mail address: (to | be used for future annual rep | ort notification |) |
| For further information concerning this matter | , please cali: | | |
| DORA CORONADO | at | 561 | 670-3525 |
| (Name of Contact | | | (Daytime Telephone Number) |
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| ■ \$35 Filing Fee □\$43.75 Filing Certificate of | Fee & Status Certified Copy (Additional copy is enclosed) | Certifi Certifi | Filing Fee cate of Status ed Copy ional Copy is sed) |
| Mailing Address Ameudment Section | | eet Address endment Scoti | מכ |
| Division of Corparations | Div | ision of Corpo | rations |

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle
Tailahassee, FL 32301

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Articles of Amendment to

Articles of Incorporation of MARANATHA COMMUNITY CHURCH ASSEMBLIES OF GOD INC (Name of Corporation as currently filed with the Florida Dept. of State) N94000004620 (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: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: , Florida _ (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered 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>V</u> <u>Mik</u> | <u>1 Doe</u> e <u>Jones</u> y <u>Smith</u> | |
|----------------------------------|---------------------|--|-----------------|
| Type of Action (Check One) | Title | Name | Address |
| 1) Change | Р | CHINEA, JULIO CESAR REV | 11107 SW 5TH ST |
| X Add | | | MIAMI FL 33174 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3)Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| ර)Change | | | |
| Add | | | |
| Remove | | | |

| If amending or adding additional Art (attach additional sheets, if necessary). | (Re monifol |
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| (and and anomal sheets, if necessary). | (be specific) |
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| | 11/06/2017 | |
|---|---|-------------------------|
| The date of each amendmen | t(s) adoption: | , if other than the |
| date this document was signed | l. | |
| | 11/06/2017 | |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| | nis block does not meet the applicable statutory filing requirements, this date wil he Department of State's records. | ll not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/was/were sufficient for a | rere adopted by the members and the number of votes east for the amendment(s) |) |
| There are no members or adopted by the board of | members entitled to vote on the amendment(s). The amendment(s) was/were directors. | |
| NOV Dated | PEMBER 06, 2017 | |
| Date | | |
| Signature | 1 Autorit | |
| • • | 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, or court appointed fiduciary by that fiduciary) | |
| | DORA CORONADO | |
| . — | (Typed or printed name of person signing) | |
| | TREASURER | |
| | (Title of person signing) | |