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**Concilio Pentecostal de Dios, Inc.**  
Pentecostal Council of God, Inc.

P.O. Box 590 Brandon, Florida 33509-0590

City/State/Zip

Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in      ☐ Pick up time \_\_\_\_\_      ☐ Certified Copy  
☐ Mail out      ☐ Will wait      ☐ Photocopy      ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input checked="" type="checkbox"/>	Change of Registered Agent
<input checked="" type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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-07/21/97--01037--009  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Mortham**  
Secretary of State

July 22, 1997

**CONCILIO PENTECOSTAL DE DIOS INC.**  
P.O. BOX 590  
BRANDON, FL 33509-0590

**SUBJECT: CONCILIO PENTECOSTAL DE DIOS, INC.**  
Ref. Number: N96000004959

We have received your document for CONCILIO PENTECOSTAL DE DIOS, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

**TO CHANGE THE REGISTERED AGENT OR REGISTERED OFFICE, OR BOTH, THE ENCLOSED FORM SHOULD BE COMPLETED AND RETURNED TO THIS OFFICE.**

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6050.

Vickie Whitfield  
Corporate Specialist

Letter Number: 097A00037192

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: Concilio Pentecostal de Dias Inc.  
"Pentecostal Council of God Inc."
2. The mailing address of the corporation is: Concilio Pentecostal de Dias Inc.  
P.O. Box 151501 Altamonte Springs, FL. 32715-1501
3. Date of incorporation/qualification: Sep. 25, 1996 Document number: N96000004959
4. The name and address of the current registered agent and office:

AMEL LAYERO  
343 Almenia Avenue.  
Coral Gables, Florida 33134

5. The name and address of the new registered agent and office: (P.O. Box Not Accepted)

REV. SAMUEL FIGUEROA  
860 ORIENTA AVE. #D  
Altamonte Springs FL. 32701

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Rev. Samuel Figueroa (Chairman - president) 8-22-97  
(Signature of an officer, chairman or vice chairman of the board) (Date)

Reverend SAMUEL FIGUEROA President  
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Samuel Figueroa  
(Signature of Registered Agent)

8-22-97  
(Date)

If signing on behalf of an entity:

SAMUEL FIGUEROA  
(Typed or Printed Name)

President  
(Capacity)