## N98000000897

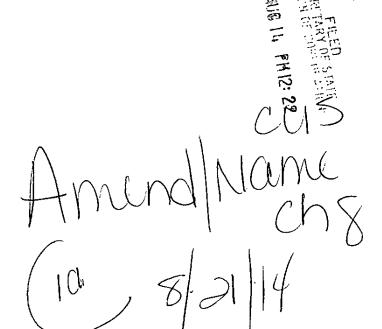
(Re	equestor's Name)	
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## **COVER LETTER**

TO: Amendment Section Division of Corporations		,	
NAME OF CORPORATION: Iglesia Cr	istiana Fue	nte De Uncion Inc	
DOCUMENT NUMBER: N9800000	897		
The enclosed Articles of Amendment and fee are subn	nitted for filing.		
Please return all correspondence concerning this matte	er to the following:		
Elvin Gonzalez			
	(Name of Contact Pers	on)	
NJ International Inc			
	(Firm/ Company)		
1916 Verano Dr Apt B			
	(Address)		
Haines City,FI 33844			
(City/ State and Zip Code)			
E-mail address: (to be used  For further information concerning this matter, please	•	t notification)	
Elvin Gonzalez		604 2754	
	at (813	Code & Daytime Telephone Number)	
(Name of Contact Person)	•	•	
Enclosed is a check for the following amount made pa	yable to the Florida De	partment 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 P.O. Box 6327 Tallahassee, FL 32314	Ame Divis Cliftd 2661	et Address Indiment Section Ission of Corporations In Building Executive Center Circle Indianal Executive Center Circle	

## Articles of Amendment to Articles of Incorporation

1

ON THEED.
14 AUG 14 PM 12: 22

	Articles	of incorporation	" AUE 1, "
Iglesia Cristiana Fuente d	•	nc	AUE 14 PM
(Name of Corporation as currently	filed with the Flo	rida Dept. of State)	
N98000000897			
(Docur	nent Number of Co	rporation (if known)	
Pursuant to the provisions of section 617.10 amendment(s) to its Articles of Incorporation		s, this <i>Florida Not For Profit Corporatio</i>	n adopts the following
A. If amending name, enter the new nam	<u>ie of the corporati</u>	on:	
Nueva Jerusalem Internac	cional Winte	r Haven, Inc	The new
name must be distinguishable and contain t "Company" or "Co." may not be used in t		ion" or "incorporated" or the abbreviati	on "Corp." or "Inc."
B. Enter new principal office address, if	applicable:	400 NE Lake Howard D	r
(Principal office address MUST BE A STREET AL		Winter Haven, Fl 33881	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1916 Verano Dr	<u>.</u>
		Apt B	
		Haines City, FL 33844	
D. If amending the registered agent and new registered agent and/or the new			<u>the</u>
Name of New Registered Agent:	N/A		
<u>New Registered Office Address:</u>		(Florida street address)	
		, Florida	
	(City)		(Zip Code)
New Registered Agent's Signature, if cha I hereby accept the appointment as register			he position.

Page 1 of 4

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	PT         John D           V         Mike J           SV         Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	<u>VP</u>	Elvin Gonzalez	1314 Estatewood Dr
Add			Brandon, FL 33510
Remove			
2) Change	<u>T</u>	Deborah Gonzales	1916 Verano Dr
Add			Apt B
X Remove			Haines City, Fl 33844
3) Change	P	Pablo Gonzales	1916 Verano Dr
X Add			Apt B
Remove			Haines City, FI 33844
4) Change	<u>s</u>	Ruth Arroyo	202 S 20th Street
X Add			Haines City, FI 33844
Remove			
5) X Change	<u>T</u>	Daniel Martinez	19210 Quail Circle
Add			Lake Wales, FL 33859
Remove			
6) Change	<u>VP</u>	Douglas Barillas	
Add			<del></del>
X Remove		Poge 2 of 4	

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)
N/A	
<u> </u>	
***************************************	

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
-		
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 a was/were sufficient for approv	adopted by the members and the number of votes cast for the amendment(s) val.	
There are no members or men adopted by the board of direct	nbers entitled to vote on the amendment(s). The amendment(s) was/were tors.	
Dated Augus	of 7, 2014	
(By the char have not be	irman or vice chairman of the boath, president or other officer-if directors een selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	<del></del>
Deborah (	Gonzales	
<del></del>	(Typed or printed name of person signing)	
Treasurer	•	
	(Title of person signing)	