N980000004073

(Do.	munatada Nama	
(Rec	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	#)
	·	
PICK-UP	☐ WAIT	MAIL
		
(Bus	siness Entity Nam	ie)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
<u> </u>		
Special Instructions to I	Filing Officer:	
1		

Office Use Only



000276286840

09/04/15--01012--022 **35.00

15 SEP -4 PM 12: 56

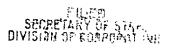
SEP 10 2015

COVER LETTER

TO: Amendment Section Division of Corporations

			,
NAME OF CORPORATION:	ION CRISTIANA,	INC.	
N98000004073 DOCUMENT NUMBER:			·
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matter	r to the following:		
MICHELLE BARRERA			
•	(Name of Contact F	Person)	
NUEVA GENERACION CRISTIANA, INC.			
	(Firm/ Compar	ny)	
16098 W STATE RD 84 SUITE #2			
	(Address)		
WESTON FL 33326			
	(City/ State and Zip	Code)	
michellebarrera1@hotmail.com			
E-mail address: (to be used	for future annual re	port notification	on)
For further information concerning this matter, please of	call:		
MICHELLE BARRERA	0	954 t	759-1956
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made page	yable to the Florida	Department of	State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fed Certified Copy (Additional copy enclosed)	is Certi (Add	50 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	A D C 2	treet Address mendment Sec division of Corp lifton Building 661 Executive fallahassee, FL	oorations Center Circle

Articles of Amendment to Articles of Incorporation of



NUEVA GENERACION CRISTIANA, INC.		15 SEP -4 PM 12: 56
(Name of Corporation as cu	rrently filed with the Flor	
N98000004073		
. (Document N	umber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida St amendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
N/A .		The new
name must be distinguishable and contain the word "corp" "Company" or "Co," may not be used in the name.	poration" or "incorporated	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRI</u>	ESS)	
·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
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 off	ice address:	
Name of New Registered Agent: N/A		
	(F)	lorida street address)
New Registered Office Address:		,
. <u>N/A</u>	·	Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	ered Agent: om familiar with and accept	the obligations of the position.
·		
	Signature of New Regis.	tered 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		Doe Jones Smith	·
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	TR	LUIS EDUARDO MARIA	79 GABLES BLVD
XAdd			WESTON FL 33326
Remove			
2) Change	TR	MAURA ALEJANDRA MATOS	1141 CROTON CT
X Add			WESTN FL 33327
Remove 3) Change	TR	ANGELO JOSHY VIERA	643 SOUTH WIND CIRCLE
X Add			SUNRISE FL 33326
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary)	(Be specific)	
N/A		
· · · · · · · · · · · · · · · · · · ·		
		_

The	date of each amendment(s) ado	ption:	, if other than the
date	this document was signed.		Filteria
Eff	ective date if applicable:		SECRETARY OF STARE DIVISION OF STARE SO WALL
		(no more than 90 days after amendment file date) =
<u>Not</u> doc	e: If the date inserted in this block ument's effective date on the Department.	does not meet the applicable statutory filing requirent of State's records.	15 SEP - 4 PM 12: 56 nents, this date will not be listed as the
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for	the amendment(s)
	There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendments.	nent(s) was/were
	have not been	an or vice chairman of the board, president or other of selected, by an incorporator of in the hands of a recipointed fiduciary by that fiduciary)	
	HERNAN	J BARRERA	
		(Typed or printed name of person signin	g)
	PRESIDE	NT	
		(Title of person signing)	