

# P10000059000

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H10000273013 3)))



H100002730133ABCR

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

**To:**

Division of Corporations  
Fax Number : (850) 617-6380

**From:**

Account Name : EXPRESS CORPORATE FILING SERVICE INC.  
Account Number : I20000000146  
Phone : (305) 444-4994  
Fax Number : (305) 444-4977

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FILED STATE  
SECRETARY OF CORPORATIONS  
10 DEC 21 AM 10:14

RECEIVED

10 DEC 21 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
FDLF INTERNATIONAL CHAPLAINS INC**

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 04      |
| Estimated Charge      | \$35.00 |

*Amend  
@ 12/31/10*

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment  
to  
Articles of Incorporation  
of

**FDLF INTERNATIONAL CHAPLAINS INC**

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

**P10000059000**

(Document Number of Corporation (if known))

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 DEC 21 AM 10:41

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida 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," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**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:

**REINOLD CABRERAS**

**3682 W 12 AVE.**

New Registered Office Address:

(Florida street address)

**HIALEAH**

(City)

**Florida 33012**

(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)

| <u>Title</u> | <u>Name</u>             | <u>Address</u>                                  | <u>Type of Action</u>  |
|--------------|-------------------------|---|--|
| <u>P</u>     | <u>BARBARA ROJAS</u>    | <u>3682 W 12 AVE</u><br><u>HALEAH, FL 33012</u> | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| <u>P</u>     | <u>REINOLD CABRERAS</u> | <u>3682 W 12 AVE</u><br><u>HALEAH, FL 33012</u> | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
| <u>VP</u>    | <u>DINA CABRERAS</u>    | <u>3682 W 12 AVE</u><br><u>HALEAH, FL 33012</u> | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |

E. If amending or adding additional Articles, enter change(s) here:  
(attach additional sheets, if necessary). (Be specific)

---

---

---

---

---

---

---

---

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  
(If not applicable, indicate N/A)

---

---

---

---

---

---

---

---

The date of each amendment(s) adoption: 12-20-2010  
(date of adoption is required)

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 shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval  
by \_\_\_\_\_"  
(voting group)

☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 12-20-2010

Signature \_\_\_\_\_

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

REINOLD CABRERAS

(Typed or printed name of person signing)

VICE-PRESIDENT

(Title of person signing)