## P12000072352

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

	RATION: LITTLE FO		GHT, INC	
DOCUMENT NUMBER: P12000072352				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this mat	ter to the following:		
	DIEGO R. JARAN	MILLO		
		Name of Contact Persor	1	
	LITTLE FOUNTA	INS OF LIGHT,	INC	
		Firm/ Company		
	7928 RAMPART	ROAD		
		Address		
	JACKSONVILLE,	FL 32244		
		City/ State and Zip Code	9	
PA	STOR@IGLESIAI	FLS.ORG		
		ed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
ALEX MARE	RERO	at (904		
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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		Street	Address	
	endment Section	Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		
		Tallahassee, FL 32301		

## **Articles of Amendment** to **Articles of Incorporation** of

LITTLE FOUNTAINS OF LIGHT,	, INC		
(Name of Corporation as currently fil	led with the Florida Dep	ot. of State)	
P12000072352			
(Document Number of	Corporation (if known)		<del></del>
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Pr	rofit Corporation adopts the follow	wing amendment(s) to
A. If amending name, enter the new name of the co	rporation:		
			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the a	" "Inc," or "Co". A p.	oany," or "incorporated" or the rofessional corporation name mu	abbreviation
B. Enter new principal office address, if applicable:	<u></u>	, 	
(Principal office address <u>MUST BE A STREET ADD</u>			
			7 7
			907
C. Enter new mailing address, if applicable:			2 2 7
(Mailing address MAY BE A POST OFFICE BO)	<u>X</u> )		
			<b>*</b> D
	<del> </del>		
		<u>r)</u>	7
D. If amending the registered agent and/or register	ed office address in Flo	rida, enter the name of the	
new registered agent and/or the new registered of			
Name of New Registered Agent			
	(Florida street address,	)	
	(		
New Registered Office Address:	(City)	, Florida(Zip Code)	
	(314)	(Zip Cour)	
New Registered Agent's Signature, if changing Regi			
I hereby accept the appointment as registered agent.	I am familiar with and a	ccept the obligations of the position	on.
Signature of Ne	w Registered Agent, if ch	hanging	

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 <math>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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) X Change	D		CAROLINA JARAMILLO	7800 POINT MEADOWS DR
Add				APT 728
Remove				JACKSONVILLE, FL 32256
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		<del></del>		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change	<del></del>	_		
Add				
Remove				

If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)
	·
-	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis

The date of each amendment(s) adoption: 10/22/2012		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
☐ The amendment(s) was/were appromust be separately provided for a	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	for the amendment(s) was/were sufficient for approval	
by	19	
	(voting group)	
The amendment(s) was/were adoption was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder action and shareholder	
Dated 10/2/20	012	
Signature	report 1/3	
(By a di selected	tecto, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
_	PASTOR DIEGO R. JARAMILLO	
	(Typed or printed name of person signing)	
_	PRESIDENT	
	(Title of person signing)	