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R. WHITE SEP 26 2018 2018 SEP 24 AMII: 40 SECRETARY OF STATE

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: ISAIAS 45:29 Corporation JNC

DOCUMENT NUMBER: ____ P18000076768 P18000078788 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Davis Mendoza (Firm/ Company) Dolan 2d. palm Springs, FC 33606 (City/ State and Zip Code) Dovid 19.5 M280 Grania. Com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call; Dand Heudo 2A
(Name of Contact Person) at SG/- 275- 6577 .

(Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: Ճ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ■\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

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I 50105 4	5:29 (Construc	tion 1	NC	2018 SEP 24	AM 11: 40
()	Name of Corp	oration as currently	filed with the	Florida D	Sir Me State	I T CTATE
		BCCCO 7 E			TALLAHAS	SSEE, FL
	(D	ocument Number of	Corporation (i	f known)		
Pursuant to the provisions of sections Articles of Incorporation;	on 607,1006, F	lorida Statutes, this I	^e lorida Profit (Corporation	adopts the follo	owing amendment(s
A. If amending name, enter the	new name of t	he corporation:				
ISATAS 40 iname must be distinguishable at	:29 CC	DUSTRUCT	10N. 1	NC.		The new
name must be distinguishable at "Corp.," "Inc.," or Co.," or the word "chartered," "professional o	designation "e	Corp." "Inc." or "C	${\Bbb Co}^m$ - ${\Bbb A}$ profes.	" or "meo sional corp	rporated" or the poration name m	ie abbreviation ust contain the
B. <u>Enter new principal office ad</u> (Principal office address <u>MUST I</u>						
C. Enter new mailing address, (Mailing address MAY BE A		<u>E BOX</u>)				
D. If amending the registered as new registered agent and/or				enter the t	rame of the	
Name of New Registered	Agent					
		(Florida stre	et address)			
New Register <u>ed Office A</u> a	ldress:				, Florida	
<u></u>	<u></u> .		Cayı			Zip Code)
New Registered Agent's Signatu	and the above of the second	Durit turned Amounts				
New Registered Agent's Signatu I hereby accept the appointment a				the obligat	ions of the positi	on,
-		Signature of New Re	 egistered Ageni	t, if changin	ıg	

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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		_	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
61 Change			
Add			
Remove			

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The, date of each amendment(s) ac	doption: 09/19/20/8	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	09/19/2018	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this ble document's effective date on the De	ock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were as was were sufficient for approva	dopted by the members and the number of votes east for the amend al.	ment(s)
There are no members or members adopted by the board of direct	bers entitled to vote on the amendment(s). The amendment(s) was	/were
Dated	09/19/2018	
Signature	Lord Hendert	
have not be	rman or vice chairman of the board, president of other officer-if dir en selected, by an incorporator – if in the hands of a receiver, truste appointed fiduciary by that fiduciary)	
	David Mendo 2T	
	(Typed or printed name of person signing)	
	President	
 -	(Title of person signing)	