I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under
oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears
above, or on an attachment with all other like empowered.

SIGNATURE: MARTIN DAVILA
--------------------------

Electronic Signature of Signing Officer/Director Detail

#### DOCUMENT# N03000001936

### Entity Name: COMUNIDAD NOAJIDA JIZUK EMUNAH FE FORTALECIDA INC.

### Current Principal Place of Business:

2126 ALAMO AVE WAUCHULA, FL 33873

### **Current Mailing Address:**

2747 ELLIS AVE PO BOX 1222 EATON PARK, FL 33840-1222 US

# FEI Number: 56-2324620

# Name and Address of Current Registered Agent:

DAVILA, MARTIN 2747 ELLIS AVE PO BOX 1222 EATON PARK, FL 33840-1222 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

# SIGNATURE:

Electronic Signature of Registered Agent

### Officer/Director Detail :

Title	S	Title	Р
Name	LAZARO, LOURDEZ VICTORIA	Name	DAVILA, MARTIN
Address	4611 DIXIANA DR	Address City-State-Zip:	2747 ELLIS AVE PO BOX 1222
City-State-Zip:	BOWLIN GREEN FL 33834		EATON PARK FL 33840-1222
Title	Т		
Name	DAVILA, MARIA		
Address	2747 ELLIS AVE PO BOX 1222		
City-State-Zip:	EATON PARK FL 33840-1222		

PRESIDENT

03/28/2024

Date

FILED Mar 28, 2024 Secretary of State 3773019489CC

Certificate of Status Desired: No

Date