| COMPLETO, INC. | |
|--------------------------------------|--|
| Current Principal Place of Business: | |
| | |

12357 SW 132 CT. MIAMI, FL 33186

Current Mailing Address:

PO BOX 35-1657 MIAMI, FL 33135 US

FEI Number: 59-2693858

Name and Address of Current Registered Agent:

ABDO, GEORGI B 12357 SW 132 CT. MIAMI, FL 33186 US Certificate of Status Desired: No

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 :

| Ollioci/Direc | | | |
|-----------------|----------------------|-----------------|---------------------|
| Title | Р | Title | D |
| Name | ABDO, GEORGI B | Name | YUPANQUI, ANDRES |
| Address | 12357 SW 132 CT. | Address | 2951 NW 93 STREET |
| City-State-Zip: | MIAMI FL 33186 | City-State-Zip: | MIAMI FL 33147 |
| Title | SD | Title | TD |
| Name | ARISTIZABAL, SARAI A | Name | PONS, GLADIS |
| Address | 12357 SW 132 CT. | Address | 225 N.W. 32ND COURT |
| City-State-Zip: | MIAMI FL 33186 | City-State-Zip: | MIAMI FL 33125 |
| Title | TD | | |
| Name | OTERO, OBED | | |
| Address | 7917 POWDERHORN LN. | | |
| City-State-Zip: | ORLANDO FL 32825 | | |
| | | | |

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: OBED OTERO

TD

Entity Name: IGLESIA CRISTO ROMPE LAS CADENAS DEL EVANGELIO

DOCUMENT# N15847

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 26, 2016 Secretary of State CC3469672574