## 738918

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	(Address)
	(Address)
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: National Assoc	ciation of Purchasing Management-South FL
73	2912
DOCUMENT NUMBER:	0110
The enclosed Articles of Amendment and fee are sub-	mitted for filing.
Please return all correspondence concerning this matte	er to the following:
Leida Altman Carrillo	
	(Name of Contact Person)
National Association of Pur	chasing Management-South FL
	(l'irm/ Company)
P.O. BOX 523323	
	(Address)
Miami, FL 33152	
	(City/ State and Zip Code)
info@napmsfl.org	
	for future annual report notification)
For further information concerning this matter, please	call:
Leida Altman Carrillo	Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:
☐ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

National Association of Pur	chasing Managei	ment-South FLORIDA	I, INC.
(Name of Corporation as currently file			
738918	•		
(Document Nur	nber of Corporation (if know	m)	-
Pursuant to the provisions of section 617.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this <i>Florid</i>	a Not For Profit Corporation adopts	the following
A. If amending name, enter the new name o	f the corporation:		
ISM of South Florida, エル	C.		The new
name must be distinguishable and contain the v "Company" or "Co," may not be used in the n		orporated" or the abbreviation "Corp	o." or "Inc."
B. Enter new principal office address, if app (Principal office address MUST BE A STREE			. <del></del>
			<u></u>
C. Enter new mailing address, if applicable			
(Mailing address MAY BE A POST OFFIC	CE BOX)		
	<del></del>		<u> </u>
D. If amounting the assistance and and and		Clarida anton the annual of the	5 d
<ul> <li>If amending the registered agent and/or r new registered agent and/or the new registered.</li> </ul>		Fibrian, enter the name of the	
Name of New Registered Agent:			
			The state of the s
New Registered Office Address:	(Florida street a	ddress)	
		, Florida	
	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing			
I hereby accept the appointment as registered a	gent. I am familiar with an	d accept the obligations of the position	m,
<del></del>			
Signature	of New Registered Agent, it	Changing	

Page 1 of 4

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	PT V SV	John Do Mike Jo Sally Sn	nes		
Type of Action (Check One).	Title		Name		<u>Addres</u> s
1) Change	<del></del>	-	<del></del>		
Add					
Remove					
2) Change		•			
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change					
Add		_			
Remove					
5) Change					
Add		•	·	•	 
Remove					
6) Change				——————————————————————————————————————	
Add					
Remove					

[famending or adding additional Arattach additional sheets, if necessary).	(Be specific)		
	·····		
			······································
		- <u></u>	
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The c	late of each amendment(s) adoption:
Effec	tive date if applicable:
	(no more than 90 days after amendment file date)
Adop	ation of Amendment(s) (CHECK ONE)
	The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated 8/1/2013
	Signature
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Jorge Gomez
	(Typed or printed name of person signing)
	President
	(Title of person signing)