N0500000283

(Requestor's Name)
(Address)
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(Ch.(Chaha/Zi/Dhana 40)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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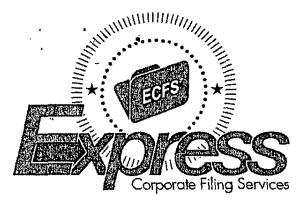
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SECRETARY OF STATES OF STATES

1/12/11



1000 Ponce de Leon Blvd. Suite: 101 Coral Gables, FL 33134

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Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

(Corporation Name) (Document #)
(Corporation Name) (Document #)
(Corporation Name)	(Document #)
Walk in Pick	up time Certified Copy
Mail out Will w	vait Photocopy Certificate of Status
	,
NEW FILINGS	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/ Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
. ,	
OTHER FILINGS	REGISTRATION
Annual Report	QUALIFICATION
Fictitious Name	Foreign
Name Reservation	Limited Partnership

Reinstatement

Trademark

Other

Articles of Amendment Articles of Incorporation of

FILED

2011 JUL 12 AM 11:53

SECRETARY OF STATE TALLAHASSEE, FLORIDA

BRIDGE OF	LOVE AND H	OPE, INC. ALL	LAIMOOL
(Name of Corporation as cu	rrently filed with	the Florida Dept, of S	itate)
NO	05000000283		
(Document N	lumber of Corporati	ion (if known)	
Pursuant to the provisions of section 617.100 the following amendment(s) to its Articles of A. If amending name, enter the new name	f Incorporation:		Profit Corporation adopts
The new name must be distinguishable and	l contain the word	"corporation" or "in	acorporated" or the
abbreviation "Corp." or "Inc." <u>"Company</u> '			•
B. Enter new principal office address, if a (Principal office address MUST BE A STRI			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OF)			
D. If amending the registered agent and/o	r registered office	address in Florida e	nter the name of the
new registered agent and/or the new re			iter the name of the
Name of New Registered Agent:			<u></u>
New Registered Office Address:	(Flori	da street address)	_
			, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if change the hereby accept the appointment as register position.			ept the obligations of the
_			·
	Signature of New	Registered Agent, if ch	anging

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	EUGENIO LLAMERA	1830 NW 7TH STREET STE 200 MIAMI FL 33125	☐ Add ☐ Remove
<u>VP</u>	JULIO CESAR ALFONSO	2520 SW 22 STREET STF 300 MIAMI FL 33145	☑ Add ☐ Remove
			☐ Add ☐ Remove
E. If amending (attach addit	g or adding additional Articles, enter c tional sheets, if necessary). (Be specific	hange(s) here: c)	
			

The date of each amendment(s) adoption: JULY 11, 2011
·	(date of adoption is required)
Effective date <u>if applicable</u> : _	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were was/were sufficient for appro	adopted by the members and the number of votes cast for the amendment(s) aval.
There are no members or me adopted by the board of dire	embers entitled to vote on the amendment(s). The amendment(s) was/were ctors.
have	he chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	MARTHA LIMA (Typed or printed name of person signing)
	PRESIDENT (Title of correct size in a)
	(Title of person signing)