

10600009336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

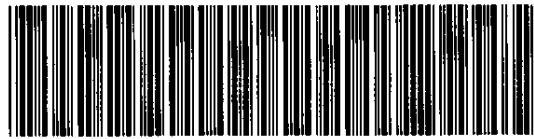
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200155984262

05/19/09--01016--014 **52.50

FILED

2009 MAY 19 AM 1:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Approved
[Signature]

5-22-09

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CENTRO MUNDIAL DE AVIVAMIENTO, INC.

DOCUMENT NUMBER: NO6000009336

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALVARO G COLLAZOS

(Name of Contact Person)

CENTRO MUNDIAL DE AVIVAMIENTO, INC.

(Firm/ Company)

1617 S FEDERAL HWY 407

(Address)

POMPAHO BEACH, FL 33062

(City/ State and Zip Code)

acollazos@zioncafe.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alvaro G Collazos

(Name of Contact Person)

at (954) 2420994

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee

\$43.75 Filing Fee &
Certificate of Status

\$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

\$52.50 Filing Fee
Certificate of Status
Certified Copy
(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

CENTRO MUNDIAL DE AVIVAMIENTO, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

NO6000009336

(Document Number of Corporation (if known))

FILED
2009 MAY 19 AM 1:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation: CN/A

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

1255 NE 178th Street
Miami, FL 33162

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

1255 NE 178th Street
Miami, FL 33162

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

ALVARO G COLLAZOS

New Registered Office Address:

1617 S FEDERAL HWY 407

(Florida street address)

POMPANO BEACH

(City)

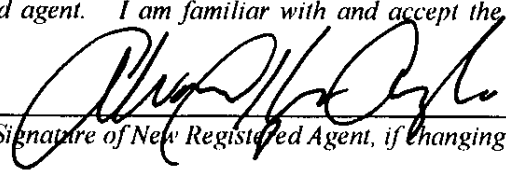
Florida

33062

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature of New Registered Agent, if changing

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>	<u>Address</u>	<u>Type of Action</u>
<u>D</u>	<u>ABRAHAM RIVERA</u>	<u>1255 NE 178th Street</u> <u>MIAMI, FL 33162</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>D</u>	<u>ALVARO G COLLAZOS</u>	<u>1617 S FEDERAL Hwy</u> <u>407</u> <u>POMPANO BEACH, FL 33062</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>S</u>	<u>ORLANDO VELEZ</u>	<u>1255 NE 178th Street</u> <u>MIAMI, FL 33162</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>T</u>	<u>JAVIER PEREZ DELATORRE</u>	<u>846 SW 120 way</u> <u>DAVIE, FL 33325-3885</u>	<input checked="" type="checkbox"/> ADD

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

ARTICLE IV : THE MANNER IN WHICH
directors are elected or appointed is:
AS DETERMINED IN THE BYLAWS.

ARTICLE V: The name and FLORIDA
street ADDRESS of the Registered agent is:
ALVARO G COLLAZOS
1617 S FEDERAL Hwy 407
POMPANO BEACH, FL 33062

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CENTRO MUNDIAL DE AVIVAMIENTO, INC.
2. The principal office address: 1617 S FEDERAL HWY 407
POMPANO BEACH, FL 33062

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 09/01/2006 Document number: NO6000009336

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

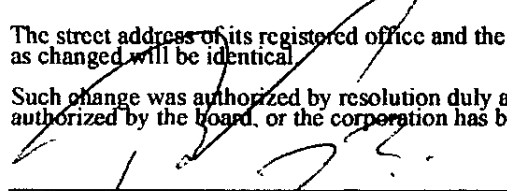
ENRIQUE LEON
692 STANTON DR
WESTON, FL 33326

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ALVARO G COLLAZOS
1617 S FEDERAL HWY 407
P.O. Box NOT acceptable
POMPANO BEACH, FL 33062

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

RICARDO RODRIGUEZ, PRESIDENT
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

MAY 11th, 2009
Date

If signing on behalf of an entity:

ALVARO G COLLAZOS
Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

The date of each amendment(s) adoption: MAY 09, 2009

Effective date if applicable: MAY 15, 2009
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- The amendment(s) was/were adopted by the members and the number of votes cast 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 MAY 09, 2009

Signature [Handwritten 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)

RICARDO RODRIGUEZ
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)