

N10000011153

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

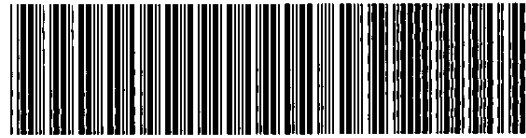
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*NA+Quik
7/18/11*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: COMITE DE APOYO PRO FABIO 2011 MIAMI FLORIDA INC.

DOCUMENT NUMBER: N10000011153

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

Please return all correspondence concerning this matter to the following:

FLOR DE MARIA HERDOCIA

(Name of Contact Person)

(Firm/ Company)

15626 SW 97th TERRACE

(Address)

MIAMI, FL 33196

(City/ State and Zip Code)

FLORMARHERD@HOTMAIL.COM

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

For further information concerning this matter, please call:

FLOR DE MARIA HERDOCIA at (305) 382-9164

(Name of Contact Person)

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 6, 2011

FLOR DE MARIA HERDOCIA
15626 SW 97TH TERRACE
MIAMI, FL 33196

SUBJECT: COMITE DE APOYO PRO FABIO 2011 MIAMI FLORIDA INC.
Ref. Number: N10000011153

We have received your document for COMITE DE APOYO PRO FABIO 2011 MIAMI FLORIDA INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 211A00016055

Articles of Amendment
to
Articles of Incorporation
of

COMITE DE APOYO PRO FABIO 2011 MIAMI FLORIDA INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

110000011153

(Document Number of Corporation (if known))

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:

ALIANZA PLI, INC.

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)

15626 SW 97th TER

MIAMI, FL 33196

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

15626 SW 97th TER

MIAMI, FL 33196

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: _____

New Registered Office Address: _____

(Florida street address)

_____, Florida
(City)

(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

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TALLAHASSEE FLORIDA

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>
DIR OF COMMUNICATIONS	MILTON CARRERA	14221 SW 48 th ST MIAMI, FL 33175	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
DIR OF PROTOCOL	DANILO HERDOCIA	15626 SW 97 th TER MIAMI, FL 33196	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: JUNE 26, 2011
(date of adoption is required)

Effective date if applicable: JULY 7, 2011
(no more than 90 days after amendment file date)

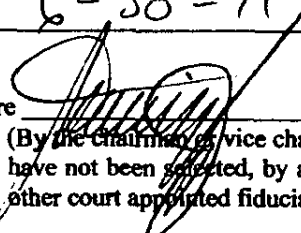
Adoption of Amendment(s) (CHECK ONE)

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 6-30-11

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)

SILVIO MORRAZ

(Typed or printed name of person signing)

DIRECTOR OF TREASURY

(Title of person signing)