Division of Corporations

Page 1 of 2



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(((H17000057552 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : FOX ROTHSCHILD LLP

Account Number : 120130000024 Phone : (215)299-2162 Fax Number : (215)299-2150

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

vlagana@foxrothschild.com Email Address:

# COR AMND/RESTATE/CORRECT OR O/D RESIGN MY PATH FOUNDATION INC

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To: Page 1 of 7



Fox Rothschild LLP

Fox Rothschild LLP From: Lagana, Vanessa

DATE: 2 0 1 7 - 0 3 - 01

11:31:41

EST

### FACSIMILE TRANSMITTAL SHEET

TO/COMPANY:

TO FAX NUMBER:

FROM:

My Path Foundation Inc. - Articles of

18506176380

Lagana, Vanessa

Amendment to Articles of Incorporation - Document No. N15000010993

NOTES/COMMENTS:

Ladies and Gentlemen,

Attached please find the Articles of Amendment to the Articles of Incorporation of My Path Foundation Inc. - Document # N15000010993, to be filed with the Florida Division of Corporations.

Please proceed accordingly.

Should any additional information is required, please contact us.

Sincerely,

Vanessa Lagana
Corporate Paralegal
Fox Rothschild LLP
One Biscayne Tower
2 S. Biscayne Blvd
Suite 2750
Miami, FL 33131
(305) 442-6544 - direct
(305) 442-6541- fax
VLagana(irfoxrothschild.com
www.foxrothschild.com

		COVER LETTER	<u>3</u>		
TO: Amendment Section Division of Corporation	าร				
NAME OF CORPORATION	MY PATH FOUND				
DOCUMENT NUMBER:	N15000010993.				
The enclosed Articles of Am	endment and fee are sub	mitted for filing.			
Please return all corresponde	ence concerning this matte	er to the following:			
VANESSA LAGANA					
		(Name of Contact Per	son)		<del></del>
FOX ROTHSCHILD LLP					
		(Firm/ Company)			
2 S. BISCAYNE BLVD., S	UITE 2750			·	
		(Address)			
MIAMI, FLORIDA 33131	·.				· · · · · · · · · · · · · · · · · · ·
		(City/ State and Zip C	ode)		
VLAGANA@FOXROTHS					
E	-mail address: (to be used	for future annual repo	rt notification	1)	
For further information conc	erning this matter, please	call:			
VANESSA LAGANA		at	305	442-6544	
	(Name of Contact Person		Area Code)	(Daytime Telephone Numb	er)
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida De	partment of S	State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	D Filing Fee cate of Status ed Copy tional Copy is sed)	The second secon
35.16-a.4	dducas	Ø4			

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

Ar	rticles of Incorporatio of	n
MY PA	ATH FOUNDATION I	INC
(Name of Corporation as cu	arrently filed with the	Florida Dept. of State)
N	115000010993	
(Document N	Number of Corporation	(if known)
Pursuant to the provisions of section 617.1006, Florida Sumendment(s) to its Articles of Incorporation:	tatutes, this <i>Florida N</i> e	ot For Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	oration:	
		The new
name must he distinguishable and contain the word "cor "Company" or "Co." may not be used in the name.	poration" or "incorpo	rated" or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable:	**************************************	
Principal office address <u>MUST BE A STREET ADDR</u>	ESS)	
	······································	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		rida, enter the name of the
Name of New Registered Agent:		
a service and a		
New Registered Office Address:		(Florida street address)
wew negationed office made in.		
	(Ciŋı)	, Florida (Zip Code)
	(CH))	(Zip Code)
New Registered Agent's Signature, if changing Regist		and the control of th
hereby accept the appointment as registered agent. I a	ım Jamiliar with and ac	xcept the obligations of the position.

Signature of New Registered Agent, if changing

Page 1 of 4

FAX AUD #H17@00575523

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 = ChiefExecutive 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	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	D,S	LUIS SANCHEZ	C/O 10200 NW 25 STREET
X Add	·		SUITE A105
Remove			DORAL, FL 33172
2) Change	AS	FLORENCE KRIETT	8125 SW 52 AVE.
X Add			MIAMI, FLORIDA 33143
Remove	P	RAUL J. VALDES-FAULI	2 SOUTH BISCAYNE BLVD.
3) Change X Add			SUITE 2750
Remove	the transfer	en e	MIAMI, FL 33131
4) Change	T	DANIEL SCHWARTZ	C/O 10200 NW 25 STREET
X			SUITE A105
Remove			DORAL, FL 33172
5) X Change	.∧b	GUILLERMO E. PALOMO, JR.	10200 NW 25 STREET
Add			SUITE A105
Remove			DORAL, FL 33172
6) Change	CEO	MARIA TERESA GONZALEZ	C/O 10200 NW 25 STREET
X Add			SUITE A105
Remove			DORAL, FL 33172

		FAX AUDIT #H17000057552
If amending or adding additional Articletach additional sheets, if necessary).	cles, enter change(s) here:	
(alluch additional sheets, if necessary).	(Be specific)	
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Page 3 of 4

The	e date of each amendment(s) adoption:	if other than the 🐪
date	e this document was signed.	
ΕÆ	ective date <u>if applicable</u> :	·
	(no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not sument's effective date on the Department of State's records.	be listed as the
Ade	option 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 January 9, 2016	<b>/</b>
	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)	_
	Guillermo E. Palomo, Jr.	,
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	