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PICK-UP WAIT	MAIL
	
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(Business Entity	Name)
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C. BRUMBLEY
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COVER LETTER .

TO: Amendment Section Division of Corporations

TR. NAME OF CORPORATION:	ABAJO Y PERSONA FOU	JNDATION INC.			
N180000					
DOCUMENT NUMBER:					
The enclosed Articles of Amendmen	and fee are submitted for	filing.			
Please return all correspondence con	cerning this matter to the f	ollowing:			
Maria Teresa Lopez					
<u> </u>	(Name o	f Contact Person)			
TRABAJO Y PERSONA FOUNDA	TION INC.				
	(Fi r r	n/ Company)			
7460 SW 131 Street					
	(Address)			-
Miami FL 33156					
	(City/ Sta	nte and Zip Code)			
mtlopez0925@gmail.com					
E-mail ad	dress: (to be used for futur	e annual report noti	fication)		
For further information concerning t	his matter, please call:				
Maria Teresa Lopez		305 at		7905772	
(Name o	of Contact Person)	(Area (Code)	(Daytime Telephone Num	ber)
Enclosed is a check for the following	g amount made payable to	he Florida Departn	nent of S	tate:	
■ \$35 Filing Fee □ \$43.1 Certi	ificate of Status Certific	ed Copy ional copy is	Certific Certifie	onal Copy is	
Mailing Address		Street Add	dress		

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

TRABAJO Y PERSONA FOUNDATION INC.

(Name of Corporation as currently filed with the Florid	a Dept. of State)		-
N18000005217			
(Document Nut	mber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statamendment(s) to its Articles of Incorporation:	tutes, this <i>Florida Noi</i>	For Profit Corporation adopts	the following
A. If amending name, enter the new name of the corpor	ration:		
			The new
name must be distinguishable and contain the word "corpo "Company" or "Co," may not be used in the name.	oration" or "incorport	ated" or the abbreviation "Corp.	" or "Inc."
B. Enter new principal office address, if applicable:		<u> </u>	
(Principal office address <u>MUST BE A STREET ADDRES</u>	(<u>22</u>	3	2021 WOV 23 AM 8: 44
			40
		· +-	- - 2:
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Į. Įr	ا م حد ع
(Mulling address MAT BE A FOST OFFICE BOA)			·
		7/1 **	- - -
D. If amending the registered agent and/or registered on new registered agent and/or the new registered office		ida, enter the name of the	
Name of New Registered Agent:			
Hume of New Registered Agent.			
		(Florida street address)	
New Registered Office Address:			
		, Florida (Zip Code)	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		rept the obligations of the positio	n,
	Signature of New Re-	gistered 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)

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: XChange X Remove X Add	<u>V</u> <u>Mike</u>	Doe 2 Jones 2 Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u> </u>	Timothy Herrmann	7460 SW 131 Street Miami FL 33156
Remove 2) Change Add	<u>D</u>	Alejandro Marius	7460 SW 131 Street Miami FL 33156
Remove 3)	<u>D</u>	Raphael Anthony Arza	7460 SW 131 Street Miami FL 33156
4) Change Add			
Remove 5) Change Add Remove			
6) Change Add			
E. If amending or add (attach additional sho		articles, enter change(s) here:). (Be specific)	;
		<u>-</u>	

		
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The date of each amendment(s) adoption: _ date this document was signed.	· · · · · · · · · · · · · · · · · · ·	_, if other than the
Effective date if applicable:	o more than 90 days after amendment file date)	
(no	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not of State's records.	be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)	

Dated	10/25/2021
174160	
Signatur	
	other court appointed fiduciary by that fiduciary)
	Timothy Herrmann (Typed or printed name of person signing)
	Timothy Herrmann
	Timothy Herrmann (Typed or printed name of person signing)