## NAC 000000069

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NICARAGUENSES EN EL MUNI NAME OF CORPORATION:		
N 2000000069 DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are submitted for filing	g.	
Please return all correspondence concerning this matter to the follow	ring:	
CESAR MOLINA SANCHEZ		
(Name of Con	itact Person)	.,
NICARAGUENSES EN EL MUNDO INC		
(Firm/ Co	ompany)	
9429 SW 145th PL		
(Addr	ress)	
Miami Fl. 33186		
(City/ State an	id Zip Code)	
nicaraguensesenelmundo@gmail.com		
E-mail address: (to be used for future ann	ual report notifica	tion)
For further information concerning this matter, please call:		
CESAR MOLINA SANCHEZ	786	856-3469
(Name of Contact Person)	at (Area Code	c) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Fl	lorida Department	of State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Certificate of Status	opy Cer copy is Cer (Ac	t.50 Filing Fee tificate of Status tified Copy Iditional Copy is closed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

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

## FILED

2021 OCT 19 AM II: 07

NICARAGUENSES EN EL MUNDO INC

(Name of Corporation as currently filed with the Florida	Dept. of State)	TARYOFA
N20000000069		iansegjeji t
(Document Nurr	nber of Corporation (if known)	<del></del>
Pursuant to the provisions of section 617.1006, Florida Stati amendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit Corporation adopts	s the following
A. If amending name, enter the new name of the corpora	ation:	
		The new
name must be distinguishable and contain the word "corpor" "Company" or "Co." may not be used in the name.	cation" or "incorporated" or the abbreviation "Cor	p." or "Inc."
B. Enter new principal office address, if applicable:	c/o Haydee Castillo	
(Principal office address <u>MUST BE A STREET ADDRES.</u>	(S) 11959 Nicholson Dr Apt 17301	
	Baton Rouge LA 70810	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		
Court W	aggress: Iolina Sanchez	
Name of New Registered Agent:		<del></del>
New Registered Office Address:	V 145th PL (Florida street address)	
Miami	. Florida 331	86
<del></del>	(City) (Zip Code	9
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am j		ion.

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	PT John Do V Mike Jo SV Sally Si	ones	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) × Change Add	<u>p</u>	Haydee Castillo Flores	11959 Nicholson Dr. Apt 17301 Baton Rouge LA 70810
Remove  2)	VP	Muriel Gomez Saenz	408 W Front St. PO BOX 1113 Alice Texas 78333
Remove	<u>T</u>	Ena M Huete	Apt R205 Miami FL 33176
4) × Change Add	<u>s</u>	Cesar Molina Sanchez	9429 SW 145th PL Miami FL 33186
Remove 51 Change Add		**	
Remove 6) Change Add			
(attach additional shee	ets, if necessary).	icles, enter change(s) here: (Be specific)  ; these changes should also be registered for	annual reporting purposes.

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The date of each amendment date this document was signed	t(s) adoption:				, if other than the
	10/04/2021				
Effective date if applicable:		0.1. 2			
	(no more than 9	0 days after amen	ament file date)		
Note: If the date inserted in the document's effective date on the	nis block does not meet the a he Department of State's rec	pplicable statutory	y filing requireme	ents, this date will not	t be listed as the

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.

Dated	October 14, 2021
Signatur	. Huw/eii
	(By the chairman of 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)
	CESAR MOLINA SANCHEZ
	(Typed or printed name of person signing)
	SECRETARY