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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	ON:				
DOCUMENT NUMBER:					
The enclosed Articles of Ar	nendment and fee are sub	mitted for filing.			
Please return all correspond	lence concerning this matt	er to the following:			
		(Name of Contact Person	n)		
		(Firm/ Company)			
		(Address)	··-		
		(City/ State and Zip Cod	e)		
For further information con	E-mail address: (to be used	•	notification)	
<u>. </u>	(Name of Contact Persor	(A)	rea Code)	(Daytime Telepho	one Number)
Enclosed is a check for the	following amount made p	ayable to the Florida Dep	artment of S	State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certific Certific	Filing Fee cate of Status ed Copy ional Copy is sed)	
		_			

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

Artick	of	GIACION				
FUNDACION INSTRUME		DE	JESU	15 (CORP	
(Name of Corporation as currently filed with the Florida						
N 21000006	939					
(Document Num	ber of Corpo	oration (if	known)			
Pursuant to the provisions of section 617,1006, Florida Statutamendment(s) to its Articles of Incorporation:	tes, this <i>Flor</i>	rida Not i	For Profit Co	rporatio	n adopts the	following
A. If amending name, enter the new name of the corpora	<u>tion:</u>					
						The new
name must be distinguishable and contain the word "corpord "Company" or "Co." may not be used in the name.	ation" or "ii	ncorpora	ed" or the ab	breviatio	m "Corp." с	_
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>						
					<u>∵</u> 2	
						2
C. Enter new mailing address, if applicable:						<u> </u>
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)					<u>۔ دایا۔</u> <i>U</i> تعرر	
					1977) - 1973 - 19	m
					: U	-
D. If amending the registered agent and/or registered off		in Floric	a, enter the	name of		
new registered agent and/or the new registered office	address:					A
Name of New Registered Agent:	· · · · · ·					
			(Florida street a	ddressi		_
New Registered Office Address:						
				Flor	rida	
	(City)				ip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for		and acce	nt the oblices	tions of th	he nasitian	
и негеоу ассери те ирроштет из гедізістей идет. Тит р	A171411 547 1111/	SEINER SICEE	pr me wingui	10110 17 W	is promined	

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)

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: X Change X Remove X Add	<u>V</u> <u>Mik</u>	n <u>Doe</u> te Jones y <u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P/1</u>	ENTRENA MARIA E	7161 SW 103 C+ CIR MAMI EL 33173
Remove 2) Change Add	MGR	RUBIO HECLOR E	7161 SW 103 Ct CIR HIAMI F1 33173
Remove Change Add Remove			
4) Chánge Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or ac (uttach additional)	dding additional sheets, if necessar	Articles, enter change(s) here: y). (Be specific)	

Effective date <u>if applicable</u> : (no more than 90 days after amendment file	o data)
The date of each amendment(s) adoption:	, if other than th

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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
Signature Muto, Bulio
(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)
HECTOR J. Rubio
(Typed or printed name of person signing)
VP
(Title of person signing)