## PIIIMPRES

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	-
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



800241688438

11/13/12--01016--018 \*\*60.00

Illidia Rua Amd

SECRETARY OF STAT

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: COOPERA	ATIVA PROGRE	SO SOCIAL INC
DOCUMENT NUMBER: P1100009280	)8	
The enclosed Articles of Amendment and fee are su		
Please return all correspondence concerning this ma	atter to the following:	
SUSANA BIJANI	l	
	Name of Contact Persor	1
JP GLOBAL BUS	SINESS SOLUTI	ONS INC
	Firm/ Company	
7325 NW 36TH S	ST	
	Address	
MIAMI, FL 33166	3	
	City/ State and Zip Code	•
JOSE.PEREZ@DAN	NIELAHART.COI	М
E-mail address: (to be u	sed for future annual report	notification)
For further information concerning this matter, plea	se call:	
SUSANA BIJANI	at (305	436-0093
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depa	irtment of State:
■ \$35 Filing Fee	\$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	

## **Articles of Amendment** to Articles of Incorporation

12 NOV 13 PM 3:50

## COOPERATIVA PROGRESO SOCIAL INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P11000092808

dment(s) to

(Document Number of Corpo	oration (if known)
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amenda
A. If amending name, enter the new name of the corpora	<del></del>
	The normalion," "company," or "incorporated" or the abbreviation, "or "Co". A professional corporation name must contain to eviation "P.A."
B. Enter new principal office address, if applicable:	11383 SW 13TH PL
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	DAVIE, FT LAUDERDALE
	33325-4543
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11383 SW 13TH PL
	DAVIE, FT LAUDERDALE
	33325-4543
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent	
	Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere	
I hereby accept the appointment as registered agent. I am	familiar with and accept the obligations of the position.
Signature of New Reg	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: X Change	PT John	<u>Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	SV Sally	y Smith	·
Type of Action (Check One)	Title	Name	Address
1) Change	<u>P</u>	SHEILA GONZALEZ	11383 SW 13TH PL
X Add			DAVIE, FT LAUDERDALE
Remove			33325-4543
2) Change	VP	MARIA MENDEZ	11383 SW 13TH PL
X			DAVIE, FT LAUDERDALE
Remove			33325-4543
3)Change			<u></u>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional A Attach additional sheets, if necessary	y). (Be specific)	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
		<del></del>		
		,		
·		<del></del>		
				······································
If an amendment provides for an e provisions for implementing the a	xchange, reclassificat	tion, or cancellation	on of issued share:	<u>S,</u>
(if not applicable, indicate N/A	)	amed in the amer	idilient itsen.	
	•			
·				
		,	······································	<del></del>
		-,	<del></del>	····

The date of each amendment(s) adoption: 11/09/2012
Effective date if applicable: 11/09/12
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 11/09/2012
Signature AU OU OU OU O
(By a director, president or other officer - if directors or officers have not been telected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
SHEILA GONZALEZ
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)