

# N94000003233

Requestor's Name

**APPELROUTH, FARAH & Co.**

PROFESSIONAL ASSOCIATION  
CERTIFIED PUBLIC ACCOUNTANTS  
999 PONCE DE LEON BOULEVARD  
SUITE 625  
CORAL GABLES, FLORIDA 33134

Office Use Only

BER(S), (if known):

1. \_\_\_\_\_  
(Corporation Name) (Document #)
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- ☐ Walk in      ☐ Pick up time \_\_\_\_\_      ☐ Certified Copy  
☐ Mail out      ☐ Will wait      ☐ Photocopy      ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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-11/02/99-01001-003  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 OCT 28 PM 2:50

11-1-99

name change

Examiner's Initials

LFT



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

October 8, 1999

APPELROUTH, FARAH & CO.  
Certified Public Accountants  
999 Ponce De Leon Blvd., Suite 625  
Coral Gables, FL 33134

SUBJECT: CUBAN HUMANITARIAN ASSISTANCE SOCIETY, INC..  
Ref. Number: N94000003233

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes. Enclosed is the correct form.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6910.

Louise Flemming-Jackson  
Corporate Specialist Supervisor

Letter Number: 399A00048946

# ARTICLES OF AMENDMENT

to

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

99 OCT 28 PM 2:50

## ARTICLES OF INCORPORATION

of

CUBAN HUMANITARIAN ASSISTANCE SOCIETY, INC.  
(present name)

Pursuant to the provisions of section 617.1006, Florida Statutes, the undersigned Florida nonprofit corporation adopts the following articles of amendment to its articles of incorporation.

**FIRST:** Amendment(s) adopted: (INDICATE ARTICLE NUMBER(S) BEING AMENDED, ADDED OR DELETED.)

### ARTICLE 1

EVANGELICAL CHRISTIAN HUMANITARIAN OUTREACH  
FOR CUBA, INC.

**SECOND:** The date of adoption of the amendment(s) was: SEPTEMBER 29, 1999

**THIRD:** Adoption of Amendment (CHECK ONE)

☐ The amendment(s) was(were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.

☒ There are no members or members entitled to vote on the amendment. The amendment(s) was(were) adopted by the board of directors.

CUBAN HUMANITARIAN ASSISTANCE SOCIETY, INC. (PRESENT NAME)

Corporation Name

X   
Signature of Chairman, Vice Chairman, President or other officer

TEO BABUN

Tel # 305-444-0999

Typed or printed name

PRESIDENT

Title

10-19-99

Date