itor's Name)					
(Address)					
(Address)					
ate/Zip/Phone #)				
WAIT	MAIL				
ss Entity Name))				
(Document Number)					
Certificates of	Status				
Special Instructions to Filing Officer:					
	ate/Zip/Phone # WAIT SE Entity Name) ent Number) Certificates of				

Office Use Only



000247862040

05/14/13--01012--019 **35.00

FILING CANCELLED RETURNED CHECK

COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: DORAL CULTURAL CENTER DOR	P.
DOCUMENT NUMBER: N1300000146	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
CESAR MURILLO (Name of Contact Person)	
EMERGENT GlobAL Consulting U	<u>-</u> C
11103 N.W 83d st # 2-204	
DORAL FL 33178	,
(City/ State and Zip Code)	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
(Name of Contact Person) at (786) 325-8403 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address Amendment Section Street Address Amendment Section	

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

FILING CANCELLED Articles of Amendment RETURNED CHECK

Articles of Incorporation currently filed with the Florida Dept. of State 000000 (Document Number of Corporation (if known) Pursuant to the provisions of section 617,1006. Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: , Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Page 1 of 4

Signature of New Registered Agent, if changing

FILING CANCELLED RETURNED CHECK

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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	•	Address
1) Change	<u>\(\alpha \)</u>	Felipe M	ladrigal	5960 NW 99 Ame
Add Remove		N A ' N C	Ω	DORAL, FL33178
2) Change Add	$\overline{\mathcal{D}}$	- Miley K	A-Burgos	Seite 6 DORAL, FL 33178
Remove 3) Change Add	P	Gloria	De LA Roca	S960 NW99 Ave
Remove 4) Change Add	<u>v P</u>	Cesar	Murillo	DORAL, FL 33178 11103 NW 83 st #2-204
Remove 5) Change Add	D	Gisela	HIDALGO	Doral, FL 3 14064 SW 104ct Mia, FL 33178
Remove Change Add	D	Karina (Somez	5960 NW 99Are Sinte 6
Remove		Pa	ige 2 of 4	Doral, FL 33178

FILING CANCELLED RETURNED CHECK

E. If amending or adding additional Ar	rticles, enter change(s) here:
E. If amending or adding additional An (attach additional sheets, if necessary).	(Be specific)
	## - ## - ## - # - # - # - # - # - # -

Effective date if applicable:

(no more than 90 days after amendment file date)

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

(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)

(Typed or printed name of person signing)

(Title of person signing)

FILING CANCELLED