NI60000154

(Re	equestor's Name)	
		
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #	f)
PICK-UP	W AIT	MAIL
(B	usiness Entity Name	;)
(D	ocument Number)	
Certified Copies	Certificates o	of Status
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SECT SET THE SECTION

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO		ILIUS MIAMI, INC		
DOCUMENT NUMBER: _	N1600001	1544		
The enclosed Articles of Am	endment and fee are subm	itted for filing.		
Please return all corresponde	nce concerning this matter	to the following:		
		JUAN C. SALAS		
	(Name of Contact Per	rson)	
	N	MATER FILIUS MIA	MI, INC	
		(Firm/ Company)		
		1167 CHENILLE	CIRCLE	
		(Address)		
		WESTON, FL 33	327	
	(City/ State and Zip C	ode)	
	jua	n.salas@materfilius	smiami.org	
E	mail address: (to be used	for future annual repo	ort notification	1)
For further information conce	erning this matter, please c	all:		
	JUAN C. SALAS	at	954	449-3755
((Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	ollowing amount made pay	able to the Florida D	epartment of	State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & ☐ Certificate of Status	3\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	0 Filing Fee icate of Status ied Copy tional Copy is ised)
Mailing A	<u>ddress</u>	Stre	et Address	

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

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

MATER FILIUS MIAMI, INC

	Articles of Amendment	_
	to	
•	Articles of Incorporation	10 10 11
	of	100 6 N
	MATER FILIUS MIAMI, INC	5 S
(Name of Corporation a	as currently filed with the Florid	a Dept. of State
	N16000011544	
(Docume	ent Number of Corporation (if kno	wn)
Pursuant to the provisions of section 617.1006, Floriamendment(s) to its Articles of Incorporation:	da Statutes, this Florida Not For I	Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
		. The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.		
B. Enter new principal office address, if applicab	ile:	
(Principal office address MUST BE A STREET AL		
		<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>ox</u>)	
D. If amending the registered agent and/or regist		nter the name of the
new registered agent and/or the new registere	d office address:	
Name of New Registered Agent:		
ivame oj įvew kegisierea Agem.		
New Registered Office Address:	(Flori	ida street address)
then hegistered Office Audi ess.		
<u>-</u>		, Florida
	(City)	(Zip Code)
Nam Degistared Agent's Signature if shanning De	ogistored Agents	
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		e obligations of the position
to a second the apparation as regimered agent.	yamma min ana accept m	a carefornia ny ma pomisin
_		
	Signature of New Register	ed 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>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>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			·
Add			-
Remove			
			
6) Change			
Add			
Remove			

(attach additional sheets, if necessary). (Be specific)
ARTICLE VIII
Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the
meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax co
or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such
assets not disposed of shall be disposed of by a court of competent jurisdiction in the county in which the principal
office of the organization is then located, exclusively for such purposes or to such organization or organizations,
as said Court shall determine, which are organized and operated exclusively for such purposes.

E. If amending or adding additional Articles, enter change(s) here:

, if other than th
listed as the