715380

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STORE DARY OF STATE

OCT 02 2014

C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ociaton of the Apostolate of Cuba(in Exile), Inc.
DOCUMENT NUMBER:	715380
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	natter to the following:
Chir	na A. Saugar
	(Name of Contact Person)
Sa	ugar, PA
	(Firm/ Company)
1609 S.V	V. 57th Avenue
	(Address)
Miami, I	Florida 33155
	(City/ State and Zip Code)
•	pa@gmail.com used for future annual report notification)
For further information concerning this matter, ple	•
China A. Saug	ar 305 266-3008 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
□ \$35 Filing Fee	e & \$\subseteq\$\$43.75 Filing Fee & S\$52.50 Filing Fee trus Certified Copy (Additional copy is enclosed) \$\subseteq\$\$ (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



Alumni Association of the Apostolate of Cubat(你是效便),Alnt: 17

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

715380

SECRETARY OF STATE
TABLAHASSER, PLONGS

(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:

N/A			The
name must be distinguishable and contain "Company" or "Co." may not be used in		ion" or "incorporated" or the abbreviation "Corp	." or "In
Company or Co. may not be used in	<u>ine name</u> .	1141 S.W. 105th Avenue	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
		Unit #505	
		Miami, FL 33174	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P.O. Box 261406	
			—
(Miami, FL 33126-9998	
		Miami, FL 33126-9998	_
D. <u>If amending the registered agent an</u> new registered agent and/or the new	registered office a	e address in Florida, enter the name of the	<u> </u>
D. If amending the registered agent an	N/A	e address in Florida, enter the name of the	
D. <u>If amending the registered agent an</u> new registered agent and/or the new	N/A N/A	e address in Florida, enter the name of the ddress:	_
D. <u>If amending the registered agent an</u> new registered agent and/or the new	N/A N/A	e address in Florida, enter the name of the	
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent:	N/A N/A	e address in Florida, enter the name of the ddress:	
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent:	N/A N/A	e address in Florida, enter the name of the ddress: (Florida street address)	ode)
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent:	N/A N/A (City)	e address in Florida, enter the name of the ddress: (Florida street address) , Florida	ode)

Page 1 of 4

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 <math>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> e <u>Jones</u> y Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	<u>P</u>	Teresita Puñal	5730 SW 4th Street
Add			Miami, FL 33144
X			
2) Change	S	Teresa L Perez	1249 S.W. 15th Terr
Add			Miami, FL 33145
X		,	
3) Change	Р	Magali Ramos	1141 S.W. 105th Ave
X			Unit #505
Remove			Miami, FL 33174
4) Change	· VP/T	Maria Faes Puga	6554 S.W. 31th St
X			Miami, FL 33155
Remove			
5) Change	S	Maria D. Medina	235 Santillana Ave
X Add			Unit #2
Remove			Coral Gables, FL 33134
6) Change		·	
Add			
Remove			

2. If amending or adding additional Articles, enter change(s) here:				
(attach additional sheets, if necessary).	Be specific)			
N/A				

The date of each amendment(s) a	July 1, 2014	, if other than the
date this document was signed.	•	
Effective date if applicable:	July 1, 2014	
	(no more than 90 days after amendment file date)	 -
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a was/were sufficient for approv	adopted by the members and the number of votes cast for the amendment(s) val.	
There are no members or men adopted by the board of direct	nbers entitled to vote on the amendment(s). The amendment(s) was/were tors.	
Dated 9	he /ref	
Signature	Mamo	_
(By the cha	irman or vice chairman of the board, president or other officer-if directors een selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
	Magali Ramos	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	