F13000005284

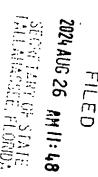
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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07/16/24 --01005--008 ##42.75





July 26, 2024

CRISTINA SUAREZ MORGENLANDER 1100 SUMMER LAKES DR ORLANDO, FL 32835

SUBJECT: CRISTINA SUAREZ MORGENLANDER HUMANITARIAN

ORGANIZATION INC.

Ref. Number: F13000005284

We have received your document for CRISTINA SUAREZ MORGENLANDER HUMANITARIAN ORGANIZATION INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FOREIGN CORPORATION. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Letter Number: 724A00016499

Rebekah Lefeavers Regulatory Specialist III

www.sunbiz.org

COVER LETTER

TO:	FO: Amendment Section Division of Corporations				
SUBJ	JECT: CRISTINA SUAREZ HUMANITARIA		ATION INC		
		Corporation			
DOC	UMENT NUMBER: F13000005284		··		
The e	nclosed Amendment and fee are submitt	ed for filing.			
Please	e return all correspondence concerning th	nis matter to	the following	z :	
Cristin	a Suarez Morgenlander				
-	Name of Contact Person		_		
Cristin	na Suarez Morgenlander Humanitarian Organizat	ion Inc			
	Firm/Company				
1100 8	Summer Lakes Dr				
	Address				
Orland	do, FL 32835				
	City/State and Zip Code		_		
csmho	.org@live.com				
<u>I</u>	i-mail address: (to be used for future annual	report notifie	ation)		
For fu	urther information concerning this matter	, please call:	:		
Cristin	a Suarez Morgenlander	407	766-5853		
	Name of Contact Person	Area Code	& Daytime T	elephone Number	
Enclo	sed is a check for the following amount:				
	1 \$35.00 Filing Fee	Certil (Addi	Filing Fee & fied Copy itional copy is losed)	□S52.50 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	Amen Divisi The C 2415	Address: dment Section on of Corpor entre of Talla N. Monroe St passee, FL 32	ations ahassee reet, Suite 810	

NOT FOR PROFIT CORPORATION APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR CONDUCTING AFFAIRS IN FLORIDA

(Pursuant to s. 617.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

F13000005284

(Typed or printed name of the person signing)

	(Document Number of Corporation (If known)						
1 CRISTINA SUAREZ MORGENLANDE	ER HUMANITARIAN ORGANIZATION INC						
(Name of corpo	oration as it appears on the records of the Department of State)						
2. California	3 12/9/2013						
(Incorporated under laws of)	3. 12/9/2013 (Date authorized to conduct affairs in Florida)						
(4-8 C	SECTION II OMPLETE ONLY THE APPLICABLE CHANGES)						
`							
-	4. If the amendment changes the name of the corporation, when was the change effected under the laws of it						
jurisdiction of incorporation? $\frac{7/11/2}{2}$	· · · · · · · · · · · · · · · · · · ·						
Note: If the date inserted in this block document's effective date on the Department	es not meet the applicable statutory filing requirements, this date will not be listed as the nt of State's records.						
5. Cristing Sucres (Name of corporation after the amendment if not contained in new name of the corporation)	Mongon Lander Humanitarian Urganization nt, adding suffix "corporation," or "incorporated," or appropriate abbreviation, reation. "Company," or "Co.," may not be used as a corporate suffix by a nonprofit Tylen						
If the amendment changes the peri effected.	od of duration, indicate new period of duration and the date the change was						
(New duration)	(Date)						
7. If the amendment changes the jur was effected.	risdiction of incorporation, indicate new jurisdiction and the state the change						
(New jurisdiction)	(Date)						
8. If the purpose which the corporation	on intends to pursue in Florida has changed, indicate/new purpose.						
(The corporation is author	rized to pursue such purpose in the jurisdiction of its incorporation)						
a Attached is a certificate or documen	at of similar import, evidencing the amendment, authenticated not more than lication to the Department of State, by the Secretary of State or other official sin the jurisdiction under the laws of which it is incorporated.						
(Signature of the of	airman or vice/chairman of the board, president, or other officer -						
if in the hands of a Michael Morgenlander	receiver, trustée, or other court-appointed fiduciary, by that fiduciary) Vice President						

(Title of person signing)



California Secretary of State

Business Programs Division 1500 11th Street, Sacramento, CA 95814

CRISTINA SUAREZ MORGENLANDER HUMANITARIAN ORGANIZATION INTERNATIONAL, INC. (CSMHO). 1100 SUMMER LAKES DR. ORLANDO, FL 32835

Business Amendment Filing Approved

August 16, 2024

Entity Name: CRISTINA SUAREZ MORGENLANDER HUMANITARIAN ORGANIZATION

INTERNATIONAL, INC. (CSMHO).

Entity Type: Nonprofit Corporation - CA - Public Benefit

Entity No.: 2681715

Document Type: Statement of Information

Document No.: BA20241485498

File Date: 08/16/2024

The above referenced document has been approved and filed with the California Secretary of State. To access free copies of filed documents, go to <u>bizfileOnline.sos.ca.gov</u> and enter the entity name or entity number in the Search module.

What's Next?

The most up to date records may be obtained by searching for the Entity Name or Entity Number in the Search module at **biz**fileOnline.sos.ca.gov.

For further assistance, contact us at (916) 657-5448 or visit **biz**fileOnline.sos.ca.gov.



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STATE OF CALIFORNIA Office of the Secretary of State STATEMENT OF INFORMATION CA NONPROFIT CORPORATION

California Secretary of State 1500 11th Street Sacramento, California 95814 (916) 657-5448

For Office Use Only

-FILED-

File No.: BA20241485498 Date Filed: 8/16/2024

Entity Details				
Corporation Name	CRISTINA SUAREZ MORGENLANDER HUMANITARIAN ORGANIZATION INTERNATIONAL, INC. (CSMHO).			
Entity No.	2681715	31715		
Formed in	CALIFORNIA			
Street Address of California Principal Office of Corporation				
Street Address of California Office	13020 OAK HILLS 225-H SEAL BEACH, CA 90740			
Mailing Address of Corporation				
Mailing Address 1100 SUMMER LAKES DR. ORLANDO, FL 32835		DR.		
Attention	Cristina Suarez Morgenlander			
Officers				
Officer Name	Officer Address	Position(s)		
CRISTINA SUAREZ MORGENLANDER	1100 SUMMER LAKES DR. ORLANDO, FL 32835	Chief Executive Officer		
Janice Krehbiel	13020 Oak Hills #225-H Seal Beach, CA 90740	Chief Financial Officer		
MICHAEL MORGENLANDER	1100 SUMMER LAKES DR	Secretary		

The entity's bylaws allow the CEO (President) to be the Secretary or CFO (Treasurer).

Additional Officers

Officer Name	Officer Address	Position	Stated Position			
None Entered						

ORLANDO, FL 32835

Agent for Service of Process

Agent Name

JANICE KREHBIEL

Agent Address

13020 OAK HILLS, # 225-H

SEAL BEACH, CA 90740

Email Notifications

Opt-in Email Notifications

Yes, I opt-in to receive entity notifications via email.

Electronic Signature

By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

08/16/2024 Michael Morgenlander

Signature

Date