## N01000003277

•
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Lida Tesseff BAVE
JTHOHIZATION BY PHONE TO
CORRECT USE PASE 4-For Signat
DATE 3/15/17
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DIVISION OF COSPORATIONS
2017 MAR 15 PM 4: 08

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March 9, 2017

LIDA RODRIGUEZ-TASEFF 1671 NW 16 TERRACE MIAMI, FL 33125

SUBJECT: SOUTH FLORIDA VOICES FOR WORKING FAMILIES,

**INCORPORATED** 

Ref. Number: N01000003277

We have received your document for SOUTH FLORIDA VOICES FOR WORKING FAMILIES, INCORPORATED 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 registered agent must sign accepting the designation.

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) 245-6050.

Valerie Herring Regulatory Specialist II

Letter Number: 617A00004538

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION		OICES FOR WOR	KING FAMII	LIES, INCORPORATED
	N01000003277			
DOCUMENT NUMBER:				
The enclosed Articles of An	nendment and fee are subm	itted for filing.		
Please return all corresponde	ence concerning this matter	to the following:		
Lida Rodriguez-Taseff				
	(	(Name of Contact Pe	erson)	
		(Firm/ Company	y)	
1671 NW 16 Terrace				
		(Address)		
Miami, Florida 33125				
	(	City/ State and Zip	Code)	
LRTaseff@duanemorris.com	n			
Е	-mail address: (to be used	for future annual rep	ort notification	n)
For further information conc	erning this matter, please c	all:		
Lida Rodriguez-Taseff		at	305	960-2242
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida I	Department of	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certi s Certi (Add	60 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing A	<u>ddress</u>	Stı	reet 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 to Articles of Incorporation of

FILES

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2017 MAR 15 PM 4: 08

## SOUTH FLORIDA VOICES FOR WORKING FAMILIES, INCORPORATED

(Name of Corporation	as currently filed	with the Florida Dep	t. of State)
N01000003277			
(Docum	ment Number of Co	orporation (if known)	
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, this I	Florida Not For Profit	Corporation adopts the following
A. If amending name, enter the new name of th	e corporation:		
N/A			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam	d "corporation" or l <u>e</u> .	"incorporated" or the	abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applica	N/A		
(Principal office address MUST BE A STREET A			
			100 TORK TORK TO THE TORK TO T
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i> ) N/A		
D. If amending the registered agent and/or regi	stered office addr	ess in Florida, enter th	ie name of the
new registered agent and/or the new register			
Name of New Registered Agent:	Lida Rodriguez-T	aseff	
	1671 NW 16th To	errace	
		(Florida stree	et address)
New Registered Office Address:			
	Miami,		, Florida 33125
	(City,	)	(Zip Code)
New Registered Agent's Signature, if changing land the la		ith and accept the oblig	zations of the position.
_	Sec	page 4	For Signafure ent, if changing
	Signature	of New Registered Age	ent, 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>V</u> <u>Mi</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	EXD	Kian Frederick	1671 NW 16 Terrace
Add			Miami, FL 33125
X Remove			
2) Change	<u>C</u>	Leo Stewart	1671 NW 16 Terrace
X Add			Miami, FL 33125
Remove 3) Change	C	Lida Rodriguez-Taseff	1671 NW 16 Terrace
X Add			Miami, FL 33125
Remove			
4) Change	T	Mishell Warner	1671 NW 16 Terrace
X Add			Miami, FL 33125
Remove			
5) Change	<u>D</u>	Marleine Bastien	1671 NW 16 Terrace
X Add			Miami, FL 33125
Remove			·
6) Change	D	Ivonne Hislop	1671 NW 16 Terrace
X Add	<del></del>		Miami, FL 33125
Remove			

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.

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Example: XChange X Remove X Add	<u>V</u> <u>M</u>	hn Doe ike Jones illy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Magallic Vandol	1671 NW 16 Terrace
X Add			Miami, FL 33125
Remove			
2) Change	<u>D</u>	Ivan Parra	1671 NW 16 Terrace
X Add			Miami, FL 33125
Remove	D	Mary Givens	1671 NW 16 Terrace
3 ) Change X Add			Miami, FL 33125
Remove			
4) Change	D	Jack Lieberman	1671 NW 16 Terrace
X Add			Miami, FL 33125
Remove			
5) Change	D	Juanita Alvarez	1671 NW 16 Terrace
X Add			Miami, FL 33125
Remove			
6) Change			
Add			
Remove			

N/A	
	•

The	date of each amendment	(s) adoption:		_, if other than the
date	this document was signed	-		
E cc	antina data if analizabla.	March 8, 201	17	
EII	ective date <u>if applicable</u> :	(n	no more than 90 days after amendment file date)	
	ee: If the date inserted in the ument's effective date on the		not meet the applicable statutory filing requirements, this date will not tof State's records.	be listed as the
Add	option of Amendment(s)	(!	CHECK ONE)	
	The amendment(s) was/w was/were sufficient for ap		y the members and the number of votes cast for the amendment(s)	
	There are no members or adopted by the board of o		tled to vote on the amendment(s). The amendment(s) was/were	
	Dated Signature	h 7, 2017	Rolls (col)	
	(By the	ot been selecte	vice chairman of the board, president or other officer-if directors ed, by an incorporator – if in the hands of a receiver, trustee, or d fiduciary by that fiduciary)	_
	Lic	la Rodriguez-1	Taseff	
	-1.17410.		(Typed or printed name of person signing)	
	Co	-Chairman	Registered Agent	
			(Title of person signing)	