## NO 000001973

| (Requestor's Name)                      |  |  |  |
|---|--|--|--|
| (Address)                               |  |  |  |
| (Address)                               |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |
|   |  |  |  |
| (Business Entity Name)                  |  |  |  |
| (Document Number)                       |  |  |  |
| Certified Copies Certificates of Status |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |
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Amend

Office Use Only

|   |                        | d= #1                 |        |
|---|------------------------|-----------------------|--------|
| <u>COVER L</u>  | <u>ETTER</u>           |                       |        |
| TO: Amendment Section<br>Division of Corporations                     |                        |                       |        |
| American Children's Ore   | hestras For Peace, I   | nc.                   |        |
| No1000007973 DOCUMENT NUMBER:   |                        |                       |        |
| The enclosed Articles of Amendment and fee are submitted for filing   |                        |                       |        |
| Please return all correspondence concerning this matter to the follow | ing:                   |                       |        |
| Santander, 1  | Maida                  |                       |        |
| (Name of Con  | tact Person)           |                       |        |
| American Children's Ore   | hestras For Peace, I   | ne.                   |        |
| (Епт. Со  | mpany)                 |                       |        |
| 2150 Coral Way Suite #  | 3 - C                  |                       |        |
| (Addr   | 288)                   |                       |        |
| Miami, FL 3314  | 5                      |                       |        |
| (City/ State and  | d Zip Coae)            |                       | ·····  |
| acop@children-for-peace.com   |                        |                       | 1      |
| E-mail address: (to be used for future anno                           | ial report notificatio | on)                   |        |
| For further information concerning this matter, please call:          |                        |                       |        |
| Santander, Maida  | 305                    | 285-2303              |        |
| (Name of Contact Person)  | at<br>(Area Code)      | (Daytime Telephone Nu | inber) |
|   |                        |                       |        |

Enclosed is a check for the following amount made payable to the Florida Department of State:

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| □ \$35 Filing Fee | □\$43.75 Filing Fee & I<br>Certificate of Status | □\$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | S52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) | 4   |
|-------------------|--|---|--|-----|
| Mailing A         | darass   | Strant  | Address  |     |
| Amendme           |  | -   | ment Section   |     |
|                   | f Corporations                                   |   | m of Corporations  |     |
| P.O. Box (        | •  | Ciliton   | Building   | · . |
| Tallahasse        | e, Fl. 32314                                     | 2661 E  | xecutive Center Circle   |     |
|                   |  | Taitaha   | issee, FL 32301  | •   |
|                   |  |   |  |     |

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## Articles of Amendment to Articles of Incorporation $\mathbf{of}$

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| (Name of Corporation   | as currently filed y     | with the Florida I        | Dept. of State)                               |
|--|--------------------------|---------------------------|---|
| N0100007973  |                          |                           |   |
| (Docum   | ent Number of Corp       | poration (if known        | ()  |
| ursuant to the provisions of section 617.1006. Flor<br>mendment(s) to its Articles of Incorporation:                             | ida Statutes, this Fl    | orida Not For Pro         | n <b>fit Corporation</b> adopts the following |
| . If amending name, enter the new name of the  | corporation:             |                           |   |
| N/A  |                          |                           | The new                                       |
| ame must be distinguishable and contain the word<br>Company" or "Co." may not be used in the name                                |                          | "incorporated" or         | the abbreviation "Corp." or "Inc."            |
| <ol> <li>Enter new principal office address, if applicat</li> <li>Principal office address <u>MUST BE A STREET AI</u></li> </ol> |                          |                           |   |
| Theph byte and starts areas and the  |                          |                           |   |
|  |                          |                           |   |
|  |                          |                           |   |
| C. Enter new mailing address, if applicable:<br>(Mailing address MAY BE A POST OFFICE E  | $OX_{i} = \frac{N/A}{2}$ |                           |   |
|  |                          |                           | 0   |
|  |                          |                           |   |
|  |                          |                           |   |
| . If amending the registered agent and/or regist   |                          | <u>s in Florida, ente</u> | r the name of the                             |
| new registered agent and/or the new registere  | d office address:        |                           |   |
| Name of New Registered Agent:  | N/A                      |                           |   |
|  |                          |                           |   |
|  |                          | (Florida                  | street address)                               |
| <u>New Registered Office Address</u> :   | N/A                      |                           |   |
|  |                          |                           | , Florida<br>(Zip Code)                       |
|  | (Čiv)                    |                           | (Zip Code)                                    |

Signature of New Registered 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:

(Attack additional sheets, if necessary)

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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, Salty Smith is named the V and S. These should be noted as John Doe. PT as a Change, Mike Jones, V as Remove, and Salty Smith, SV as an Add.

| Example:<br><u>X</u> Change<br><u>X</u> Remove<br><u>X</u> Add | <u>V</u> <u>Mik</u> | <u>. Doe</u><br>e Jones<br><u>e Smith</u> |                             |
|--|---------------------|---|-----------------------------|
| <u>Type of Action</u><br>(Check One)                           | Title               | Name                                      | <u>Address</u>              |
| 1) Change  | \$                  | Rod, Denis Dr.                            | 801 SW 3rd Ave 308          |
| Add  |                     |   | Miami, FL33130              |
| X Remove   |                     |   |                             |
| 2) Change  | D                   | Perez-Aryan, Elia                         | 1237 Ferdmand ST            |
| Add  |                     |   | Coral Gabies FL, 33134      |
| X Remove   |                     |   |                             |
| 3) Change  | S                   | Perez- Aryan, Elia                        | 1237 Ferinand ST            |
| XAdd   |                     |   | Coral Gables FL, 33134      |
| Remove   |                     |   |                             |
| 4) Change  | Т                   | Perez. Alexander L.                       | Certified Public Accountant |
| X Add  |                     |   | 2600 Dougias Road, PH -8    |
| Remove   |                     |   | Coral Gables, FL 33134      |
| 57 Change  | D                   | Oliva, Carlos                             |                             |
| X Add  |                     |   |                             |
| Remove   |                     |   |                             |
| റെ Change  | C                   | Jimenez, Ross                             | 1400 SW 1st Stree           |
| X Add  |                     |   | Miami, FL 33135             |
| Remove   |                     | Bury 2 of 1                               |                             |

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

(attach additional sheets, if necessary). (Be specific)

Add- Chairman Borad of Director Emeritus, Diaz- Yoserev, Rafael Dr. Address- 3211 Ponce De-Leon BLVD, Suite 210

Coral Gables FL, 33134

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Add- New Board member- Bermello, Willy, Address 2601 S. Bayshore Drive STI: 1060 Miami, FL 33133.

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Page 3 of 4

| 02/07/2018   |  |
|--|--|
| The date of each amendment(s) adoption:  | _, if other than the                         |
| date this document was signed.   |  |
| Effective date <u>if applicable</u> :  |  |
| (no more than 90 days after amondment file date)   | <u>.                                    </u> |
| <b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not b document's effective date on the Department of State's records. | e listed as the                              |
| Adoption of Amendment(s) ( <u>CHECK ONE</u> )  |  |
| 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.   |  |
| 02/07/2018   |  |
| Signature My Vantauler   | _  |
| (By the chairman or vice chairman of the board, president or other officer-if directors<br>have not been selected, by an incorporator – if in the hands of a receiver, trustee, or               |  |
| other court appointed fiduciary by that fiduciary)   |  |
| Maida Santander /  |  |
| (Typed or printed name of person signing)  |  |
| President: Co-Founder  |  |

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(Title of person signing)