NO200003464

(Re	equestor's Name)	
(Ad	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
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C. CARROUTERS



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 26, 2016

JOSE I ROJAS ESQ DLD LAWYERS 150 ALHAMBRA CIRCLE PENTHOUSE CORAL GABLES, FL 33134

SUBJECT: FLORIDA DISTRICT EXPORT COUNCIL, INC.

Ref. Number: N02000003464

We have received your document for FLORIDA DISTRICT EXPORT COUNCIL, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$35.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

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.

Cathy A Carrothers Regulatory Specialist

Letter Number: 816A00008554

16 MAY 23 PH 3: 51

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: No2000003464	
DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jose I. Rojas, Esq. (Name of Contact Person) DLD Lawyers (Firm/ Company) 150 Alhambra Circle, Penthouse (Address)	
Please return all correspondence concerning this matter to the following: Jose I. Rojas, Esq. (Name of Contact Person) DLD Lawyers (Firm/ Company) 150 Alhambra Circle, Penthouse (Address)	
Jose I. Rojas, Esq. (Name of Contact Person) DLD Lawyers (Firm/ Company) 150 Alhambra Circle, Penthouse (Address)	
(Name of Contact Person) DLD Lawyers (Firm/ Company) 150 Alhambra Circle, Penthouse (Address)	
DLD Lawyers (Firm/ Company) 150 Alhambra Circle, Penthouse (Address)	
(Firm/ Company) 150 Alhambra Circle, Penthouse (Address)	
150 Alhambra Circle, Penthouse (Address)	
(Address)	
Coral Gables, FL 33134	
(City/ State and Zip Code)	
jrojas@dldlawyers.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Jose I. Rojas 305 443-4850	
(Name of Contact Person) (Area Code) (Daytime Telephone Num	nber)
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee \$\begin{array}{c} \begin{array}{c} \text{\$43.75 Filing Fee & \$\begin{array}{c} \text{\$43.75 Filing Fee & Certificate of Status} \\ \text{\$Certified Copy} & Certificate of Status} \\ \text{\$(Additional copy is enclosed)} & (Additional Copy is Enclosed) \end{array} \]	

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

6 APR 25 PH 2: 2

Articles of Amendment to Articles of Incorporation of

Florida District Export Council, Inc.		
(Name of Corporation as cur	rently filed with the Florida De	pt. of State)
N02000003464		
(Document Nu	ımber of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not For Profit</i>	t Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:	
South Florida District Export Council, Inc.		The new
name must be distinguishable and contain the word "corpo" "Company" or "Co." may not be used in the name.	oration" or "incorporated" or th	e abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	1850 Eller Drive	
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>SSS</u>) Suite 401	
	Fort Lauderdale, FL 33316	
		()
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		المدن المراقع : المراقع :
(Mulling uturess MAT BE A FOST OFFICE BOX)		
		<u> </u>
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.		he name of the
Insel	Rojas, P.A. c/o DLD Lawyers	
Name of New Registered Agent:		
130 Ai	hambra Circle, Penthouse	
New Registered Office Address:	(Florida stre	et adaress)
Coral C	Gables,	, Florida 33134
	(City)	(Zip Code)
Nam Dagista and Amenda Ciamatana (Cabangian Dagista)		
New Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am		gations of the position.
	Signature of New Registered Ag	2
	Signatible of New Registered Ag	ent, if changing

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 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	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>T</u>	Abigail Martinez	1850 Eller Drive
Add	•		Suite 401
X Remove			Fort Lauderdale, FL 33316
2) Change	Т	Carlos A. Somoza	2699 S. Bayshore Drive
X Add			Miami, FL 33133
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	,		
Remove			
б) Change			
Add			
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	icles, enter change(s) here:		
(attach additional sheets, if necessary).	(Be specific)		
A . / A			
NA			
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	e date of each amendment(s) adoption: 2/22/2016 e this document was signed.	_, if other than the
	ective date if applicable: Z/ZZ/ZO16	
Not	(no more than 90 days after amendment file date) te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be	e listed as the
doc	pument's effective date on the Department of State's records. Option of Amendment(s) (CHECK ONE)	
	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.	
	Dated 4/22/2016 Signature Somma	
		-
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	James M. Anzalone (Typed or printed name of person signing)	
	Chairman (Title of person signing)	