N02000004710

(Ře	equestor's Name)	
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(Ci	ty/State/Zip/Phone	e #)
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15 JUL -5 AM 8: 10

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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: National Associ	ationof WomenBusin	essOwners,Gre	aterMiami, Inc.
N02000004710			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this n	natter to the following:		
Alma Kadragic			
	(Name of Contact	Person)	
NationalAssociationof WomenBusinessOwner	rs,GreateiMiami, Inc.		
	(Firm/ Compa	nny)	
1825Poncede Leon Blvd #113			
	(Address)		
Coral Gables,FL 33134			
	(City/ State and Zi	p Code)	
alma.kadragic@gmail.com			
E-mail address: (to be	used for future annual i	eport notification	n)
For further information concerning this matter, ple	ase call:		
Alma Kadragic		407 at	921-6148
(Name of Contact Per			(Daytime Telephone Number)
Enclosed is a check for the following amount mad	e payable to the Florid	a Department of	State:
	e & □\$43.75 Filing Fotos Certified Copy (Additional copy enclosed)	Certif y is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address		Street Address	
Amendment Section		Amendment Sect	
Division of Corporations	1	Division of Corp	orations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SEGRETARY OF STATE DIVISION OF CORPORATIONS

National Association of vomen Business Owners, Gr	eaterviami, inc.	15 JUL -6 AM 8: I
(Name of Corporation as	currently filed with the Flor	
N02000004710		
(Document	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	r Profit Corporation adopts the following
A. If amending name, enter the new name of the con	rporation:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated	l" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	1825Poncede Leon	Blvd
(Principal office address MUST BE A STREET ADD	<u>RESS</u>) #113	
	Coral Gables FL 33	134
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	1825Poncede Leon	Blvd
	#113	
	Coral Gables FL 33	134
D. If amending the registered agent and/or registered		enter the name of the
new registered agent and/or the new registered of		
Name of New Registered Agent:	ma Kadragic	
18	1825Poncede Leon Blvd #113	
New Projection of Control Address	(Florida street address)	
<u>New Registered Office Address</u> : Co	oralGables	33134
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Regil I hereby accept the appointment as registered agent.		the obligations of the position.
	ank	<u> </u>
	Signature of New Regist	ered 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:

(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 A Add	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	JenniferOhl	750 Jeronimc Drive
Add			CoralGables,FL 33146
X Remove			
2) Change	<u> </u>	KarenLapekas	1 SE3rd Avenue- Suite3000
Add			Miami, FL 33131
X Remove			
3) Change	<u>s</u>	SusarDierenfeldt-Troy	7103SW102ndAvenue,SuiteB
Add			Miami, FL 33173
X Remove			
4) Change	Τ	EvelynHsu	8950SW74thCourt
Add			Suite2201-A24
X Remove			Miami, FL 33156
5) Change	Р	Alma Kadragic	1300PoncedeLeonBlvd #503
X Add			CoralGablesFL 33134
Remove			
6) Change	٧	AnneFreedman	10401SW82 Court
X Add			Miami, FL 33156
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
7) X Add S DawnJacobsorl3745SW73rdCourt,PalmettoBay,FL 33158				
B) X Add T DebraSilverman7700North Kendall Drive - Suite807, Miami, FL 33156				

	•	June8, 2015	
	date of each amendr	nent(s) adoption:	, if other than the
	this document was signerity date if applicable	lune 2015	FILED TARY OF STATE OF CORPORATIONS
		(no more than OA days after amendment file date)	
Not doci	e: If the date inserted ument's effective date	in this block does not meet the applicable statutory filing requirements, this date on the Department of State's records.	will not be listed as the
Ada	ption of Amendment	(s) (<u>CHECK ONE</u>)	
	The amendment(s) w was/were sufficient for	as/were adopted by the members and the number of votes cast for the amendment approval.	nt(s)
	There are no member adopted by the board	s or members entitled to vote on the amendment(s). The amendment(s) was/wer of directors.	re
	J Dated	uly 29, 2015	
	Signature	ale Ky.	
	ha	vithe chairman or vice chairman of the board, president or other officer-if directive not been selected, by an incorporator — if in the hands of a receiver, trustee, ther court appointed fiduciary by that fiduciary)	
		Alma Kadragic	
		(Typed or printed name of person signing)	_
		President	
		(Title of person signing)	_