11/23/2030

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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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	will generate another cover sheet.		Tru)	23
To:	Division of Corporations Fax Number : (850)617-6380		ECRL IARY O	3 JAN 11 P
From:	Account Name : LAZARUS CORPORATE FILIN Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)220-1440	NG SERVICE, INC	F-57376	H 1: 14

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address	·							
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COR AMND/RESTATE/CORRECT OR O/D RESIGN MIAMI DADE COMMUNITY SERVICES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Amend

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Electronic Filing Menu

Corporate Filing Menu

Help

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T. LEWIS

ł	Articles of Amendment			
	Articles of Incorporation			
	miani har annity SERVICES	. 70	10	
	MIAMI DADE COMMUNITY SERVICES Name of Corporation as currently filed with the Florida Dept. of State	4 -TN	ic.	
(L		•		
	NO20000 8565	_		
1	(Document Number of Corporation (if known)			
	at to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the next(s) to its Articles of Incorporation:	: following		
A. <u>Ifar</u>	mending name, enter the new name of the corporation:			
		The new		
	nust be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp."	or "Inc."		
"Compa	any" or "Co." may not be used in the name.			
	er new principal office address, if applicable:		2	
(Princip	pal office address MUST BE A STREET ADDRESS)		=======================================	
		-52	Ξ	and the same
		_ 	Ξ	***
		SS		Territoria 2
C. Rnt	ter new mailing address, if applicable: siling address MAY BE A POST OFFICE BOX)	(i	-73	17
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}		— ?*	_	
D. Hai	mending the registered agent and/or registered office address in Florida, enter the name of the			
new	registered agent and/or the new registered office address:			
	Name of New Registered Agent:			
	(Florida stree; address)			
New Re	sgistered Office Address:			
	Florida			
İ	, Florida, [City) (Zip Code)			
	egistered Agent's Signature, if changing Registered Agent: y accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			
1 mcreo)	у оссерь на муронитель из registered agent. 1 ит јатинаг with and accept the oungations of the position.			
	Signature of New Registered Agent, 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.

X Change X Remove X Add	<u>V</u> <u>Mik</u>	Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P-VP	JOSE M. ROIG	
Add			
Remove			
2)Change	V-P	ROSALINA LINA	<u> </u>
Add			
Remove	V-P	ALFONSO F VALCA	aCEI
3) Change		11210430 : 1110	
Remove			
4)Change	V-P	RAFAEL J BOT	T <u>A</u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		.7	
Add			
Remove		Page 2 of 4	

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E. 1	. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
G	trach additional shoets of perassary)	(Re enecific)				
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Page 3 of 4

The date of each amendment(s) adoption: 1-13				
Effective date if applicable:	(
	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adwas/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s) i.			
There are no members or members adopted by the board of director d	cars entitled to vote on the amendment(s). The amendment(s) was/were			
(By the chair) have not bee	man or vice chairman of the board, president or other officer-if directors in selected, by an incorporator—if in the hands of a receiver, trustee, or poointed fiduciary by that fiduciary)			
	JOSE M ROLG			
	(Typed or printed name of person signing)			
	PRESIDENT			
]	(Title of person signing)			