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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CENTRO COMUNITARIO DE AYUDA ENLACE INC.

DOCUMENT NUMBER: NO30000006087

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ILSE HERNANDEZ
(Name of Contact Person)

CENTRO COMUNITARIO DE AYUDA ENLACE INC.
(Firm/ Company)

18335 NW 61 AVENUE
(Address)

MIAMI, FL 33015
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

ILSE HERNANDEZ at (305) 823-3760
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee ☒ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

FILED
04 JUL 27 PM 12:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

CENTRO COMUNITARIO DE AYUDA "ENLACE", INC.
(Name of corporation as currently filed with the Florida Dept. of State)

NO3000006087

(Document number of corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

n/a

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

Article III

The specific purpose for which this corporation is organized is:
operate exclusively for charitable, educational, and scientific purposes by offering an array of health and human services and assistances to assist poor, low-income and disadvantaged population in Hialeah and surrounding communities of Miami-Dade County, so these groups can achieve self-sufficiency and become a productive members of their communities.

(Attach additional pages if necessary) (continued)

The date of adoption of the amendment(s) was: 7/16/04

Effective date if applicable: UPON APPROVAL
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☒ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signed this 16 day of JULY, 2004.

Signature Celmary Descartes
(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

CELMARY DESCARTES
(Typed or printed name of person signing)

Vice Pres / chairman
(Title of person signing)

FILING FEE: \$35