NO3000006749

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COVER LETTER

TO: Amendment Section Division of Corporation	ns ·			0	-	เ
NAME OF CORPORATI	Hispanic Heritage S ON:	cholarship Fund of Metr	o Orlando,	Inc 		۰,
DOCUMENT NUMBER:	N03000006749					
The enclosed Articles of Art	nendment and fee are sub	mitted for filing.				
Please return all correspond	ence concerning this mat	ter to the following:				
Carolin Requiz Smith						
	·····	(Name of Contact Person	ບ ກ)			
Hispanic Heritage Schilarsh	nip Fund of Metro Orland	o. Inc				
		(Firm/ Company)				
518 S. Magnolia Ave.						
		(Address)				
Orlando, FL 32801						
		(City/ State and Zip Co	de)			
carolin@hhsfmo.org						26
I	-mail address: (to be use	d for future annual repor	t notificatio	n)	• •	1.3
For further information con-	cerning this matter, please	e call:				:
Carolin Requiz Smith			17	457.64.82		<u></u>
	(Name of Contact Persor		Area Code)	(Daytime Telep	hone Numb	per)
Enclosed is a check for the	following amount made p	ayable to the Florida De	partment of	State:		E
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)	,	
Mailing /	Address ent Section		t Address idment Sect	ion		
	AC		iument sect			

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Hispanic Heritage Scholarship Fund of Metro Orlando, Inc

Name of Corporation as currently filed with the Florida I	Dept. of State)	
N03000006749		
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts th	ie following
A. If amending name, enter the new name of the corporat	ion:	
Hispanic Heritage Scholarship Fund, Inc		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp."	
B. Enter new principal office address, if applicable:	518 S. Magnolia Ave.	
(Principal office address MUST BE A STREET ADDRESS	Orlando, FL 32801	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	518 S. Magnolia Ave.	
	Orlando, FL 32801	_
		<u>~</u>
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		
Name of New Registered Agent:		
		;
New Registered Office Address:	(Florida street address)	မှ မ
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fail		
	CM D 11 11 11 11 11	
Si	gnature 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:

(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	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sr	ones	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change Add		_		
Remove				
2) Change Add		_		
Remove 3) Remove Add Remove				
4) Change Add		_		
Remove				
5) Change Add				
Remove				
δ) Change Add		_	***************************************	
Remove				
E. If amending or addin (attach additional shee			cles, enter change(s) here: (Be specific)	
			· · · · · · · · · · · · · · · · · · ·	
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The date of each amendment(s) adoption: date this document was signed.		, if other than the
2		
Effective date if applicable:		
(ne	o more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does r document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be of State's records.	e listed as the
Adoption of Amendment(s) (9	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	y the members and the number of votes cast for the amendment(s)	

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 07/31/2022
Signature 4 amile M. Juna
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by armicorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
YAMILE M. LUNA
(Typed or printed name of person signing)

HISPANIC HERITAGE SCHOLARSHIP FUND BOARD CHAIR (Title of person signing)