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Certified Copies	Certificates	of:Status
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COVER LETTER

Amendment Section

Division of Corporations
SUBJECT: Flotida HISPANIC LEANS LOTIVE FOUNDATION, INC.
DOCUMENT NUMBER: NO300008809
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following:
JUAN ZAPATA Name of Contact Person
Firm/Company
13550 SW 88 St. Ste. 150 Address
MIAMILEL 33180 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Street Address: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment

to

Articles of Incorporation

of

FILED

Articles of Incorporation

SECRETARY DE STATE

(Name of Corporation as currently filed with the Florida Dept. of State)

NO3000088U9

(Document Number of Corporation (if known)

ant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation a flowing amendment(s) to its Articles of Incorporation:

Pursuant to the provisions of section 617.1006, Florida Statutes, the following amendment(s) to its Articles of Incorporation:	, this Florida Not For Profit Corporation adopts	
A. If amending name, enter the new name of the corporatio	<u>n:</u>	
Florida Hispanic Foundation	n. Inc.	
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may not	"corporation" or "incorporated" or the be used in the name.	
B. Enter new principal office address, if applicable:	13550 SW80LN Ste. 150	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI, FL 33186	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13550.SW 80 St. Ste.150	
	Miami, FL 33184	
D. If amending the registered agent and/or registered office		
new registered agent and/or the new registered office add		
Name of New Registered Agent: JUON C.	2APAHA	
12925 S	W 88 UN	
New Registered Office Address: (Flori	ida street address)	
MIAMI	, Florida 33180	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered A		
I hereby accept the appointment as registered agent. I am position.	familiar with and accept the obligations of the	
Signature of New	Registered Agent, if changing	

Page 1 of 3

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
0_	tony Castro		☐ Add ☐ Remove
0	Rick Bichara		☐ Add
0	Manny Prieguez		Add Remove
(allach al Chou	and to Attice of the special state of the special s	rcific)	Is the Florida ter sometimes

The date of each amendment(s) adoption: 10 13 09
(tiate of adoption is required)
Effective date if applicable: (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(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 10 27 09 Signature
(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, o other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
VICE-Chairman (Title of person signing)