# 1105000005213

| (Re                     | equestor's Name)   |             |  |
|-------------------------|--------------------|-------------|--|
| (Ad                     | ldress)            |             |  |
| (Ad                     | ldress)            |             |  |
| (Cit                    | ty/State/Zip/Phone | e #)        |  |
| PICK-UP                 | ☐ WAIT             | MAIL        |  |
| (Ви                     | usiness Entity Nar | ne)         |  |
| (Document Number)       |                    |             |  |
| Certified Copies        | _ Certificates     | s of Status |  |
| Special Instructions to | Filing Officer:    |             |  |
|                         |                    |             |  |
|                         |                    |             |  |
|                         |                    |             |  |

Office Use Only



500305322255

11/06/17--01016--001 \*\*43.75

FILED

77 NOV -6 PH 3: 09

78 NOV -6 PH 3: 09

R. WHITE NOV - 7 2017

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

## PEACE LEADERS FOUNDATION (LIDERES DE PAZ) INC. NAME OF CORPORATION: N05000005213 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Cristina Alonso (Name of Contact Person) Peace Leaders Foundation (Firm/ Company) 22056 SW 131st Place (Address) Miami, FL 33170 (City/ State and Zip Code) erikxalonso@aot.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Cristina Alonso 305 984-0541 (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee ■\$43.75 Filing Fee & ☐\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

FILED

17 NOV -6 PH 3: 09

SECRETARY OF STATE
TALLAHASSET FROME

#### Articles of Amendment to Articles of Incorporation of

PEACE LEADERS FOUNDATION (LIDERES DE PAZ) INC.

| (Name of Corporation as N05000005213   | currently filed with the Flori                            | da Dept. of State)                      |
|--|---|---|
| (Document  | Number of Corporation (if kn                              | own)                                    |
| Pursuant to the provisions of section 617,1006, Florida amendment(s) to its Articles of Incorporation:   | Statutes, this Florida Not For                            | Profit Corporation adopts the following |
| A. If amending name, enter the new name of the co  | rporation:  |   |
| Soaring Hope Children's Foundation Inc.  |   | The new                                 |
| name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.     | orporation" or "incorporated                              |   |
| B. Enter new principal office address, if applicables  | N/A   |   |
| (Principal office address <u>MUST BE A STREET ADD</u>  | RESS )  |   |
|  | •   |   |
| C. Enter new mailing address, if applicable:<br>(Mailing address MAY BE A POST OFFICE BO)                | 22056 SW 131st Place                                      | e                                       |
|  | Miami, FL 33170   |   |
|  |   |   |
| D. If amonding the registered agent and/or registered  | ad office address in Elevide                              | and an about a second of the            |
| D. If amending the registered agent and/or register<br>new registered agent and/or the new registered of | <u>ed office address in Fiorida, (</u><br>office address: | enter the name of the                   |
| N/<br>Name of New Registered Agent:  | <del>-</del>  |   |
| N/   | A   |   |
| _  | (Flo  | rida street address)                    |
| <u>New Registered Office Address</u> :<br>N/   | A   | N/A                                     |
|  | (City)  | , Florida<br>(Zip Code)                 |
| New Registered Agent's Signature, if changing Regi   |   |   |
| I hereby accept the appointment as registered agent.   | t am familiar with and accept t                           | the obligations of the position.        |
| •  | SIA   |   |
| <del>-</del> -   | Signature of New Registe                                  | 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 X.Add | <u>V</u> <u>Mil</u> | n Doe<br>se Jones<br>sy Smith |                      |
|-----------------------------------|---------------------|-------------------------------|----------------------|
| Type of Action (Check One)        | <u>Title</u>        | Name                          | Address              |
| 1) Change                         | TD                  | Abel Ramirez                  | 9800 SW 12th Terrace |
| Add                               |                     |                               | Miami, FL 33174      |
| X Remove                          |                     |                               |                      |
| 2) Change                         | S                   | Lauren Horgan                 | 22056 SW 131st Place |
| X<br>Add                          |                     |                               | Miami, FL 33170      |
| Remove                            |                     |                               |                      |
| 3) Change                         |                     |                               |                      |
| Add                               |                     |                               |                      |
| Remove                            |                     |                               |                      |
| 4) Change                         |                     |                               |                      |
| Add                               |                     |                               |                      |
| Remove                            |                     |                               |                      |
| 5) Change                         |                     |                               |                      |
| Add                               |                     |                               |                      |
| Remove                            |                     |                               |                      |
| 6) Change                         |                     |                               |                      |
| Add                               |                     |                               |                      |
| Remove                            |                     |                               |                      |

| E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) |  |  |  |  |
|---|--|--|--|--|
| N/A   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| <del></del>   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| <del>-</del> <del>-</del>   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |

|       |   | N/A ;   |                     |
|-------|---|---|---------------------|
|       | date of each amendmer                           |   | , if other than the |
| date  | this document was signe                         |   |                     |
| EPPP. | ativa data if applicable                        | November 01, 2017   |                     |
| Litte | ective date <u>if applicable</u> :              | (no more than 90 days after amendment file date)  |                     |
|       |   | this block does not meet the applicable statutory filing requirements, this date will not be the Department of State's records.   | listed as the       |
| Ado   | option of Amendment(s)                          | (CHECK ONE)   |                     |
|       | The amendment(s) was/was/were sufficient for a  | were adopted by the members and the number of votes east for the amendment(s) approval.   |                     |
|       | There are no members of adopted by the board of | or members entitled to vote on the amendment(s). The amendment(s) was/were f directors.   |                     |
|       | Nov<br>Dated                                    | ember 01, 2017  |                     |
|       | Signature <u></u>                               | ne chairmartor 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, or recourt appointed fiduciary by that fiduciary) |                     |
|       | Λ   | Aercedes Christian  |                     |
|       |   | (Typed or printed name of person signing)   |                     |
|       | P   | resident  |                     |
|       |   | (Title of person signing)   |                     |