

NO6000003880

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NR / Amend

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 DEC -7 AM 8:30

FILED

T. Roberts DEC 08 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PRO-FONDO UNA ESPERANZA DE VIDA
EMILY Y FOXSANNÉ, INC.

DOCUMENT NUMBER: NO6000003880

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

Please return all correspondence concerning this matter to the following:

ZENAIDA SANTIAGO
(Name of Contact Person)

PRO-FONDO UNA ESPERANZA
(Firm/ Company)

909 WINBROOKS DRIVE
(Address)

DELTONA FL 32725
(City/ State and Zip Code)

For further information concerning this matter, please call:

CARLOS VALDERRAMA at (321) 206-8377
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

PRO-FONDO UNA ESPERANZA DE VIDA EMILY y ROXANNE, INC.
(Name of corporation as currently filed with the Florida Dept. of State)

NO 6000003880

(Document number of corporation (if known))

← MIS-Spelled

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):

← CORRECTION

PRO-FONDO UNA ESPERANZA DE VIDA EMILY y ROXANNE, INC.
(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**)

ADD: SECRETARY/DIRECTOR

SONIA N. OQUENDO

522 BLACKSTONE AVE.

DELTONA, FL 32725

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DELETE: DIRECTORS/OFFICERS

GEORGINA ORTIZ

EDWIN BADILLO

1783 GATEWOOD DRIVE

P.O. BOX 390364

DELTONA, FL 32738

DELTONA, FL 32729

The date of adoption of the amendment(s) was: 12-1-06

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 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.

Signature _____

Zenaida Santiago
(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, or other court appointed fiduciary, by that fiduciary.)

ZENAIDA SANTIAGO

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)

FILING FEE: \$35