

ND600000004828

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

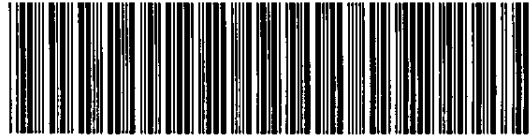
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF REVENUE
#2 NOV -5 AM 11:34

Amend/cc
@ 11.5.12

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Puerto Rico Chamber of Commerce of NorthEast FI, Inc

DOCUMENT NUMBER: N06000004828

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

Please return all correspondence concerning this matter to the following:

Orlando Robles

(Name of Contact Person)

(Firm/ Company)

6169 Faulkner Cir.

(Address)

Jacksonville, FI 32244

(City/ State and Zip Code)

prccnf@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Orlando Robles

(Name of Contact Person)

at (904) 803-0669

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$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

Puerto Rico Chamber of Commerce of NorthEast Florida, Inc.

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

N06000004828

(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:

A. If amending name, enter the new name of the corporation:

_____ The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

6169 Faulkner Cir.

Jacksonville, FI 32244

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P. O. Box 16186

Jacksonville FI 32245

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: _____

(Florida street address)

New Registered Office Address:

(City)

_____, Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

STATE OF FLORIDA
DIVISION OF CORPORATE REGISTRATION
12 NOV -5 AM 11:34

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Orlando Robles</u>	<u>6169 Faulkner Cir.</u> <u>Jacksonville, FL 32244</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>Millie Colon</u>	<u>2618 Carson Oaks Dr.</u> <u>Jacksonville FL 32221</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Vanesa de Leon</u>	<u>113 Crown Wheel Cir.</u> <u>St. Johns FL 32259</u>
4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Nilda Alejandro (Former President)</u>	<u>P.O Box 452105</u> <u>Kissimmee FL 34745</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Agustin Popoca</u>	<u>6169 Faulkner Cir</u> <u>Jacksonville FL 32244</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Mabel Oquendo</u>	<u>4108 Pepperwood Dr.</u> <u>Antioch TN 37013</u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Amending the Officers and/or Directors (Cont.)

7. Remove	Leslie Sabek		12021 Nccormick Rd. Apt 701 Jacksonville FI 32225
8. Remove	Lina Castillo		2445 Townsquare DR. Jacksonville FI 32216
9. Remove	Martha Pellino		260 Waters Edge Dr. South Ponte Vedra FI 32082
10. Add	Hector Bello	D	6169 Faulkner Cir. Jacksonville FI 32244

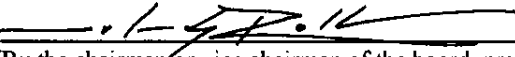
The date of each amendment(s) adoption: 10/29/2012

Effective date if applicable: 10/29/2012
(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 10/31/2012

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, or other court appointed fiduciary by that fiduciary)

Orlando Robles
(Typed or printed name of person signing)

President
(Title of person signing)