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Amend Tuws 3-18-09

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Greater Migmi Youth Chambe
DOCUMENT NUMBER: N 06000 10028
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Fabiola Dolcine (Name of Contact Person)
Greater Miami Youth Chamber, I
501 SW 1 Street # 201
MIAMILE (City/State and Zip Code)
For further information concerning this matter, please call:
Fabiola Dulcine at (305) 776-8199 (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 \$\ \text{S43.75 Filing Fee & Certificate of Status} \text{Certified Copy (Additional copy is enclosed)} \text{Certified Copy (Additional Copy is enclosed)} \text{Certified Copy (Additional Copy is enclosed)}
Mailing Address Amendment Section Street Address Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

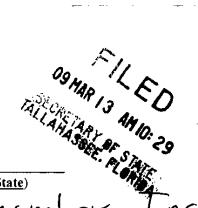
Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the Florida Dept, of State)
Greator Miami Youth Chamber, Inc
NOGO 00010028 (Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> 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," "company," or incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or 'Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) MIAMITEL MIAMITEL
Principal office address MUST BE A STREET ADDRESS) MIAMITAL
33/42
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Same as above
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: DOUGLAS I. MAYOFGA
New Registered Office Address: 701 Brickell Aurnue #1550 (Florida street address)
MIAMI Florida F
(City) (Zip Code) 33131
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent of changing

	he Officers and/or Directors, enter the t		rector being
	title, name, and address of each Officer nal sheets, if necessary)	and/or Director being added:	
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>			Add Remove
Sccret	DouGlas I May	m, AMI, FC	Acrose #1550 Add Remove
			Add Remove
E. <u>If amendin</u> (attach addii	g or adding additional Articles, enter cl tional sheets, if necessary). (Be specific	hange(s) here: SEE Attachmen	nt "A"
	ndment provides for an exchange, recla		
`	for implementing the amendment if no applicable, indicate N/A)	t contained in the amendment i	tself:

Attachunti (A)

MISSION STATEMENT

ADOPTED AS ARTICLE IN OUR FLORIDA NON PROFIT ORGANIZATION BY DECEMBER 20, 2008

We enrich the lives of children, youth, and families by providing educational programs and services in communities confronting high rates of poverty and other barriers to educational achievement and social success.

ARTICLES TO BE ADOPTED

"Notwithstanding any other provision of this document, the Organization shall not carry on any other activities not permitted to be carried on (a) by an organization exempt from Federal Income Tax under section 501-c(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or (b) by an organization, contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code, or corresponding section of any future Federal Tax Code".

"No part of the net earnings of this organization shall inure to the benefits of this institution, or to be distributed to its members, trustee, officers, or other private persons, except that the organization shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purpose set forth in the purpose clause hereof".

"Upon the dissolution of the organization, assets shall be distributed for one or more exempt, purpose within the meaning of section 501-c(3) of the Internal Revenue Code, or corresponding section of any future Federal Tax Code, or shall be distributed to the Federal Government, or to a State or Local government, for a public purpose".

Statement of Declaration:

Under penalties of perjury, I declare that I have examined this information, including accompanying documents, and, to best of my knowledge and belief, the information contains all the relevant facts relating to the request for the information, and such facts are true, correct, and complete.

Declare today December 20, 2008 by:

FABILA DOLCINE Executive Director

DOUGLAS MAYORGA -SECRETARY

The date of each amendment	t(s) adoption:	1/2 Ce	emt)e/	20,	200
Effective date <u>if applicable</u> :	(no more than 9	<u>embe</u>	·-/	20,	20	50 S
Adoption of Amendment(s)	(<u>CH</u>	ECK ONE)				
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☐ The amendment(s) was/we must be separately provide						
"The number of votes	cast for the amen	dment(s) was/w	ere suffici	ent for appi	oval	
by	(voting group)		····	.**		
	(voting group)					
The amendment(s) was/we action was not required.	re adopted by the	board of direct	ors withou	t sharehold	er action and	l shareholder
The amendment(s) was/we action was not required.	re adopted by the	incorporators v	vithout sha	ıreholder ac	tion and sha	reholder
Dated	ece-f		720)))		
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	´ (Ty	ped or printed n	ame of per	rson signing	g)	
	Exec	utive	Dire	etor		-
		(Title of pers	on signing)		