## N080000004556

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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations Organizacion Hondurena Hijos y Amigos de EL PROGRESO Corp. NAME OF CORPORATION: N08000004556 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Adriana Panchame Kruger (Name of Contact Person) (Firm/ Company) 8421 NW 140 street #3504 (Address) Miami Lakes, FL 33016 (City/ State and Zip Code) ADRIANAPANCHAMEKRUGER@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ADRIANA PANCHAME (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** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment. to Articles of Incorporation of

FILED

	01	
ORGANIZACION HONDURENA HIJOS Y AM	IGOS DE EL PROGRESO CORP	-7 PH 2: 18
(Name of Corporation as currently filed with the Flo	rida Dept. of State)	This is a second
N08000004556	10 A T	ASSEE, FLORID
(Document Number of Co	orporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statute mendment(s) to its Articles of Incorporation:		e following
A. If amending name, enter the new name of the corporati	ion:	
FUNDACION HONDURENA HIJOS Y AMIGOS	S DE EL PROGRESO CORP	The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp."	
3. Enter new principal office address, if applicable:	8421 NW 140 STREET	
Principal office address <u>MUST BE A STREET ADDRESS</u> )	MIAMI LAKES FLORIDA 33016	٠.,
	·	
		<del></del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8421 NW 140 STREET	
	MIAMI LAKES, FLORIDA 33016	_
•		_
). If amending the registered agent and/or registered office new registered agent and/or the new registered office a		_
Name of New Registered Agent: - CRIQNO		
8421 NW 14	yoth St. Unit 3504	
New Registered Office Address:	(Florida street address)	
Migmy Lok	ies , Florida <u>33016</u> - 67	109
(City)	(Zip Code	e).
hereby accept the appointment as registered agent. I am fan	niliar with and accept the obligations of the position.	
Signature of New 1	Registered Agent, if changing	

Page 1 of 4

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	V Mike	Doe 2 Jones 4 Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	VP	Agustin Vasquez	8421 NW 1405 +3504 Miami Lakes F/3301
Remove			
2) Change	VP	Dora Gegueiros	12285 SW 143 LW MIOMI, FL 33186
Remove 3 ) Change Add Remove	<u>S</u>	Magaly Rodriguez	8421 NW 1407hst Umit 3501 MIGMI Lakas F/33016
4) Change Add	<del></del>		
Remove  5) Change Add			
Remove			
6) Change			
Add Remove			

If amending or adding additional Artication and Artication additional sheets, if necessary).	(Be specific)
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	date of each amendmen	• • • • • • • • • • • • • • • • • • • •	if other than the	
	ate this document was signed.  Affective date if applicable: 4/25/2013			
		(no more than 90 days after amendment file date)		
Ada	option of Amendment(s)	( <u>CHECK ONE</u> )		
	The amendment(s) was/w was/were sufficient for ap	were adopted by the members and the number of votes cast for the amendment(s) opproval.		
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.		
	Dated 4/2	5/2013		
	Signature	Edriona Truger		
	have r	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)		
	ADRIA	ANA PANCHAME KRUGER		
		(Typed or printed name of person signing)		
	PRES	IDENT		
		(Title of person signing)		