N08000006244

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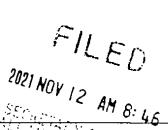
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Miami Beach Gay Pride, Inc		
N08000006244 DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Bruce Horwich		
(Name of Contact	rson)	
Miami Beach Gay Pride, Inc		
(Firm/ Compa)	
1210 Washington Avenue, Suite 255		
(Address)		
Miami Beach, FL 33139		
(City/ State and Zi	Tode)	
Bruce.Horwich@MiamiBeachPride.com		
E-mail address: (to be used for future annual r	ort notification)	
For further information concerning this matter, please call:		
Bruce Horwich	305 345	-3535
(Name of Contact Person)	(Area Code) (Da	ytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida	epartment of State	
■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fe Certificate of Status	Certificate	of Status opy
	et Address endment Section	
	ision of Corporatio	ns

P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



Miami Beach Gay Pride, Inc

			<u> </u>
(Name of Corporation as currently filed with the Florida	Dept. of State)		
N08000006244		1900	77 M. E.
(Document Numb	er of Corporation (if k	nown)	
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not Fo</i>	r Profit Corporation :	adopts the following
A. If amending name, enter the new name of the corpora	tion:		
name must be distinguishable and contain the word "corpora		,,, , , , , , , , , , , , , , , , , ,	The new
"Company" or "Co." may not be used in the name.	tion or incorporated	t or the abbreviation	"Corp. or "Inc.
B. Enter new principal office address, if applicable:	1210 Washington Av	enue	
(Principal office address <u>MUST BE A STREET ADDRESS</u>) Suite 255		
	Miami Beach, FL 331	39	
C. 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 offinew registered agent and/or the new registered office:		enter the name of th	<u>e</u>
Name of New Registered Agent:			
New Registered Office Address;	(Fl	orida street address)	
		, Florida	1
	(City)	(Zip	Code)
New Registered Agent's Signature, if changing Registered			
I hereby accept the appointment as registered agent. I am fa	miliar with and accept	the obligations of the _i	position.

Signature of New Registered 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		Doe : Jones · Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	<u>T</u>	Victor Diaz-Herman	1210 Washington Ave., Suite 210 Miami Beach, FL 33139
x Remove			
2) <u>*</u> Change Add	<u>T</u>	Matthew Thomas	1210 Washington Ave., Suite 255 Miami Beach, FL 33139
Remove Change Add Remove	CEO	Richard Walczak	1210 Washington Ave., Suite 210 Miami Beach, FL 33139
4) Change Add	<u>s</u>	Cesar Jose Velez Polít	1210 Washington Ave., Suite 255 Miami Beach, FL 33139
Remove 5)ChangeAddRemove			
6) Change Add			
E. If amending or addin (attach additional shee	g additional A is, if necessary)	rticles, enter change(s) here: (Be specific)	
			

_		<u>_</u>		
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			-	
	-			
				<u>.</u>
-				
			. .	_
	11/8/2021			
The date of each amendment(s) adopt date this document was signed.	ion:		· · · · · · · · · · · · · · · · · · ·	, if other than the
Effective date if applicable:	(no more than 90 days aft			
	(no more than 90 days aft	er amendment file date)		
<u>Note:</u> If the date inserted in this block d document's effective date on the Department	oes not meet the applicable ment of State's records.	statutory filing requirem	ents, this date will not	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the n	number of votes east for	the amendment(s)	

There are no membadopted by the box	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.
Dated	11/08/2021
Signature	Bune Hourit
(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)
	Bruce Horwich
	(Typed or printed name of person signing)
	Chairman of the Board

(Title of person signing)