

NO8000009157

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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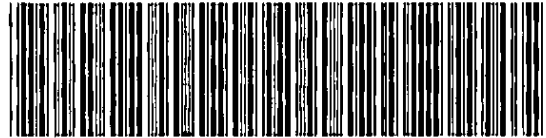
(Business Entity Name)

(Document Number)

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TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Council of Hispanic Business Professionals, Inc

DOCUMENT NUMBER: NØ8ØØØØØ9157

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

Please return all correspondence concerning this matter to the following:

Mercedes Fonte

(Name of Contact Person)

Merrill Lynch

(Firm/ Company)

4246 Raffia Preserve way

(Address)

Naples FL 34119

(City/ State and Zip Code)

mercedes fonte @ gmail. com

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

For further information concerning this matter, please call:

Mercedes Fonte

(Name of Contact Person)

at (239) 273-3279

(Area Code) (Daytime Telephone Number)

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

- |   |   |  |  |
|---|---|--|--|
| <input checked="" 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 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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

Council of Hispanic Business Professionals, Inc.  
(Name of Corporation as currently filed with the Florida Dept. of State)

N 0 8 0 0 0 0 9 1 5 7

(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)

14848 Old 41 Rd  
Suite 2  
Naples FL 34110

**C. Enter new mailing address, if applicable:**  
(Mailing address MAY BE A POST OFFICE BOX)

**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:

Malcolm Brarella

2628 Ponce de Leon Dr.  
(Florida street address)

New Registered Office Address:

Naples FL  
(City)

Florida

(Zip Code)

34105

**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.

Malcolm Brarella

Signature of New Registered Agent, if changing

03/1/05

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>

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>Silva, Betsy</u>	<u>539 Beach Walk Cir</u> <u>Naples FL 34108</u>
2) <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Gianella, Malcolm</u>	<u>899 Vanderbilt Beach Rd</u> <u>Naples FL 34108</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Torres, Richard</u>	<u>772 109th Ave N</u> <u>Naples FL 34108</u>
4) <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Suyi, Yamirka</u>	<u>14848 Old 41 Rd</u> <u>Suite 2</u> <u>Naples FL 34110</u>
5) <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Neal, Yenny</u>	<u>PO Box 1155</u> <u>Estero FL 33928</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

See Attached for additional

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:

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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>

Type of Action  
(Check One)

Title

Name

Address

- |  |                 |                          |  |
|--|-----------------|--------------------------|--|
| 1) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>Pres</u>     | <u>Rodriguez, Carlos</u> | <u>899 vanderbilt Beach</u><br><u>Naples FL 34108</u>                    |
| 2) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>VP</u>       | <u>D'Amico, Anna</u>     | <u>5871 wisperwood CT</u><br><u>Naples, FL 34110</u>                     |
| 3) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>TREA</u>     | <u>Gonzalez, Ruth</u>    | <u>PO box 507</u><br><u>Naples FL 34106</u>                              |
| 4) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>Director</u> | <u>Vasquez, Eric</u>     | <u>4100 Corporate Square,</u><br><u>Naples FL 34104</u>                  |
| 5) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>Director</u> | <u>Rojas, Claudia</u>    | <u>4100 Corporate Square,</u><br><u>Naples FL 34104</u>                  |
| 6) <input checked="" type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>P</u>        | <u>Fonte, Mercedes</u>   | <u>9128 strada/piccola</u><br><u>suite 301</u><br><u>Naples FL 34108</u> |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

See Attached for additional

4246 Raffia Press  
way  
Naples FL 34119

Please note the following changes as stated

Remove - Pres - Carlos Rodriguez, VP - Anna D'Amico, Treas - Ruth Gonzalez, Director - Eric Vasquez, Director - Claudia Rojas, they are no longer affiliated with the organization

Change - Mercedes Fonte from Treasurer to P - President.

Add - V - Betsy Silva, T - Malcolm Gianella, D - Richard Torres, D - Yamirka Sny, S - Yenny Neal

Keep the following as they are: D - Maria Botana, D - Gabriel Veliz, D - Martin Nestares.

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

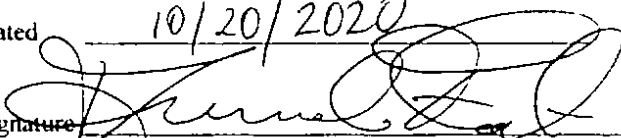
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 10/20/2020

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)

Mercedes Fonto

(Typed or printed name of person signing)

President.

(Title of person signing)