N08000011529

(Requestor's Name)	
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(1	City/State/Zip/Phone #)	***************************************
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Amend

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: THE PROMI	SE LAND FOUNDATION IN	IC
DOCUMENT NUM	BER: N08000011529		
The enclosed Articles	s of Amendment and fee a	are submitted for filing.	
Please return all corre	espondence concerning the	is matter to the following:	
NALD	A HERRERA	20	
		of Contact Person)	
THE P	ROMISE LAND FOUN (Fil	TOATION, INC.	
11301	SW 154 STREET	(Address)	
MIAM	I FL 33157	,	·
For further information	(City/Son concerning this matter,	tate and Zip Code) please call:	
NALDA HERRERA		at (
	f Contact Person) or the following amount n	(Area Code & Daytime nade payable to the Florida De	
\$35 Filing Fee		S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Add Amendment S Division of Co P.O. Box 632 Tallahassee, F	iection orporations 7	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cl Tallahassee, FL 32301	ircle

Articles of Amendment to Articles of Incorporation of

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of State)	· / / 0	RIOA
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THE PROMISE LAND FOUNDATION INC
(Name of Corporation as currently filed with the Florida Dept. of State)

N08000011529 (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) 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: (Florida street address) New Registered Office Address: (City) (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

If amendin	g the Officers and/or Directors, enter t	he title and name of each officer/d	irector being
	itional sheets, if necessary)	icer and/or Director being added.	
<u>Title</u>	<u>Name</u>	Address	Type of Action
			_
			_
			_
	ding or adding additional Articles, entided and its description of the special distribution of the special distrib		
A. The pu	irpose for which the corporation is	organized are exclusively cha	aritable,
scientific,	literary and educational skill traini	ng and other issues of value to	our community
<u>enhancin</u>	g the individuals motivations to ad	vance. Areas of social services	s, within the
meaning	of section 501 (c) (3) of the Intern	al Revenue Code of 1986 or th	ne correspon-
ding prov	ision of any future United States Ir	nternal Revenue Code.	
B. Notwitl	hstanding any other provision of th	ese articles, this organization	shall not carry
on any ac	ctivities not permitted to be carried	on by an organization exempt	from Federal
income ta	ax under section 501 (c) (3) of the	Internal Revenue Code of 198	6 or the
correspo	nding provision of any future Unite	d States Internal Revenue Cod	de.
C. Upon	the dissolution of the organization	assets shall be distributed for	one or more
exempt p	urposes within the meaning of the	section 501 (c) (3) of the Inte	rnal Revenue
Code of	1986, or corresponding section of	any future Federal tax code, o	r shall be
distribute	ed to the federal, state, or local gov	vernment for a public purpose.	Any such
assets no	ot so disposed of shall be disposed	i of by a court of competent jur	isdiction of
the count	ty in which the office of the organiz	ration is then located, exclusiv	ely for such
purposes			

The date of each amendmen	t(s) adoption: 01/08/2009
Effective date if applicable:	01/08/2009
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_ <u>01/</u>	Malda Mulla.
hav	y the 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 her court appointed fiduciary by that fiduciary)
	NALDA HERRERA (Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)