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COVER LETTER

TO: Amendment Section

Division of Corporations			
NAME OF CORPORATION: ESPERA	NZA FOUN	DATION, INC.	
DOCUMENT NUMBER: NO900000	1462		
The enclosed Articles of Amendment and fee are sub-	mitted for filing.		
Please return all correspondence concerning this matte	er to the following:		
CIRIA	ACO MEDIN	1A	
	(Name of Contact Perso	1)	
ESPERANZA	A FOUNDA	TION, INC.	
	(Firm/ Company)		
3204 N	NW 17TH A	VE.	
	(Address)		
MIAN	MI, FL. 3314	12	
	(City/ State and Zip Cod	e)	
leocommuni			
E-mail address: (to be used	for future annual report	notification)	
For further information concerning this matter, please	call:		
Ciriaco Medina	at (786	333-0750	
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Numb	er)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	ertment of State:	
■ \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	SECRE TALLAH

Mailing Address

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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Articles of Amendment Articles of Incorporation

ESPERANZA FOUNDATION, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) N09000000462

(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

f amending name, enter the new name of the corporat	_ N/A	The new
e must be distinguishable and contain the word "corpora npany" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp.	" or "Inc."
nter new principal office address, if applicable:	3204 NW 17TH AVE.	
cipal office address <u>MUST BE A STREET ADDRESS</u>	MIAMI, FL. 33142	
Enter new mailing address, if applicable: Mailing address <u>MAY BE A POST OFFICE BOX</u>)	3204 NW 17TH AVE.	
	MIAMI, FL. 33142	
f amending the registered agent and/or registered office a new registered agent and/or the new registered office a Name of New Registered Agent:	ce address in Florida, enter the name of the address:	
New Registered Office Address:	(Florida street address)	
	VK , Florida	- A
(City)	(Zip Co	
(City) Registered Agent's Signature, if changing Registered eby accept the appointment as registered agent. I am fai	Agent:	3 DEC 16 ECRETARY

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 Doc 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	PT John D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>V</u>	JAROLINA NOLBERTO	Homestead, Fl. 33030
2) Change Add Remove 3) Change			
Add			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

ttach additional sheets, if necessary).	(Be specific)
	<u> </u>
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The date of each amendment(s) adoption:	, if other than the
date this document was signed. Effective date if applicable: 12/04/2013	
(no more than 90 days after amendment file date)	. .
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the was/were sufficient for approval.	amendment(s)
There are no members or members entitled to vote on the amendment(s). The amendment(adopted by the board of directors.	(s) was/were
Dated 12/04/2013	
Signature	
(By the chairman or vice chairman of the board, president or other office have not been selected, by an incorporator – if in the hands of a receive other court appointed fiduciary by that fiduciary)	
CIRIACO MEDINA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

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SECRETARY OF STATE
SECRETARY OF STATE