

N09000002157

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(Business Entity Name)

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FILED
12 APR 24 AM 8:46
SECRETARY OF STATE
TALLAHASSEE FLORIDA

APR 25 2012
T. ROBERTS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 3, 2012

MARITZA RUIZ
TAMPA LATIN CHAMBER, INC.
P O BOX 20933
TAMPA, FL 33624

SUBJECT: TAMPA LATIN CHAMBER, INC.
Ref. Number: N09000002157

We have received your document for TAMPA LATIN CHAMBER, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina Roberts
Regulatory Specialist II

Letter Number: 112A00010876

RECEIVED
12 APR 24 AM 8:08
TAMPA LATIN CHAMBER, INC.
TAMPA, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: TAMPA Latin Chamber, Inc.

DOCUMENT NUMBER: NO9000002157

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

Please return all correspondence concerning this matter to the following:

Maritza Ruiz

(Name of Contact Person)

(Firm/ Company)

11035 LYNN LAKE CR

(Address)

TAMPA, FL 33625

(City/ State and Zip Code)

maritza96@gmail.com

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

For further information concerning this matter, please call:

Maritza Ruiz

(Name of Contact Person)

at (813) 220-2602

(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

TAMPA Latin Chamber, Inc.

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

N09000002157

(Document Number of Corporation (if known))

FILED
12 APR 24 AM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

N/A

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**)

11035

11035 LYNN Lake CR

TAMPA, FL 33625

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

P.O. Box 20933

TAMPA, FL 33622

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:

Maritza Ruiz

11035 LYNN Lake CR

(Florida street address)

New Registered Office Address:

TAMPA

(City)

Florida

(Zip Code)

33625

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.

Maritza Ruiz

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u> </u> Change <u> </u> Add <u>X</u> Remove	<u>PD</u>	<u>Alfred Frederick</u>	<u>P.O. Box 20933</u> <u>Tampa, FL 33624</u>
2) <u>X</u> Change <u> </u> Add <u> </u> Remove	<u>PD</u>	<u>Jolie Gonzalez</u>	<u>P.O. Box 20933</u> <u>Tampa, FL 33624</u>
3) <u> </u> Change <u>X</u> Add <u> </u> Remove	<u>TD</u>	<u>Maritza Ruiz</u>	<u>P.O. Box 20933</u> <u>Tampa, FL 33624</u>
4) <u> </u> Change <u>X</u> Add <u> </u> Remove	<u>SD</u>	<u>Leticia Leon</u>	<u>P.O. Box 20933</u> <u>Tampa, FL 33624</u>
5) <u> </u> Change <u>X</u> Add <u> </u> Remove	<u>VPD</u>	<u>Christian Salazar</u>	<u>P.O. Box 20933</u> <u>Tampa, FL 33624</u>
6) <u> </u> Change <u> </u> Add <u>X</u> Remove	<u>TD</u>	<u>Rachel Carrillo</u>	<u>P.O. Box 20933</u> <u>Tampa, FL 33624</u>

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Remove - PED Ilean Devin PO Box 20933 Tampa, FL 33624

Remove - SD Ileana Iturriaga-Giordano PO Box 20933 Tampa, FL 33624

Remove -SD Norma Camero-Reno PO Box 20933 Tampa, FL 33624

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: Jan 1, 2012

Effective date if applicable: Jan 1, 2012
(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 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 4-15-12

Signature Maritza Ruiz
(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)

Maritza Ruiz
(Typed or printed name of person signing)
Treasurer
(Title of person signing)