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(Re	equestor's Name)	-
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PICK-UP	☐ WAIT	MAIL
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AUG 18 2017 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

FUNDACION RAYI NAME OF CORPORATION:	TO DE LUZ CORP	
N0900002361 DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are subtr	nitted for filing.	
Please return all correspondence concerning this matter	r to the following:	
JAMES GONZALEZ		
	(Name of Contact Person)	
AT PLUS CORP		
	(Firm/ Company)	
3650 NW 82ND AVE SUITE 404		
	(Address)	
DORAL, FL 33178		
1	(City/ State and Zip Code)	
ATPLUS@LIVE.COM		
E-mail address: (to be used	for future annual report notification)	
For further information concerning this matter, please of	call:	
JAMES GONZALEZ	305 4063800 at	
(Name of Contact Person)		nber)
Enclosed is a check for the following amount made pay	yable to the Florida Department of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$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

·	Articles of Amendment	ida Dept. of State)
,	to Articles of Incorporation	49
	of	
FUNDACION RAYITO DE LUZ CORP		
(Name of Corporation as	currently filed with the Flori	da Dept. of State)
N09000002361		
(Document	t Number of Corporation (if kn	iown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	
		The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	orporation" or "incorporated	
B. Enter new principal office address, if applicable	<u> </u>	
(Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO.	<u>Y</u>)	
		•
D. If amending the registered agent and/or register	ed office address in Florida,	enter the name of the
new registered agent and/or the new registered of	office address:	
Name of New Registered Agent:		
	(Fle	orida street address)
<u>New Registered Office Address:</u>		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi	istored Avent	
I hereby accept the appointment as registered agent.		the obligations of the position.
	·	•
	Signature of New Registo	ered 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	<u>V</u> <u>Mil</u>	nn <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	RAQUEL ALONZO NATERA	636 NW 114TH AVE
Add			APT#103
X Remove			MIAMI, FL 33172
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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	e date of each amendment(s) adoption:	_, if other than the
erf	ective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not but enter the date on the Department of State's records.	pe listed as the
٨d٠	option of Amendment(s) (<u>CHECK ONE</u>)	
	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 AUGUST 8, 2017	
	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)	
	MARISOL RUSSIAN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	