## N09000005269

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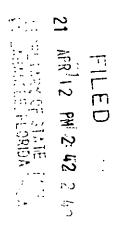
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

VETERANOS GUARDIA NACIONAL DE NIC NAME OF CORPORATION:	CARAGUA, INC.
N0900005269 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
RONALDO ADRIAN MOREIRA	
(Name of Contact Person)	
VETERANOS GUARDIA NACIONAL DE NICARAGUA, INC.	
(Firm/ Company)	
8075 SW 107 AVE. APT -215	
(Address)	
MIAMI, FL. 33173	
(City/ State and Zip Code)	
mariobaldizon@att.net	
E-mail address: (to be used for future annual report not	ilication)
For further information concerning this matter, please call:	
RONALDO ADRIAN MOREIRA (305)	244-4672
	Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Departr	nent of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee \& \Bigcup \\$43.75 Filing Fee \& Certificate of Status Certified Copy (Additional copy is enclosed)	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

VETERANOS GUARDIA NACIONAL DE NICARAGUA, INC.

(Name of Corporation as currently filed with the	Florida D	Dept. of State)	
N09000005269			
(Docum	ent Numb	er of Corporation (if known)	<del></del>
Pursuant to the provisions of section 617.1006, Floramendment(s) to its Articles of Incorporation:	rida Statute	es, this Florida Not For Profit Corporation adopts the follo	owing
A. If amending name, enter the new name of the	corporat	ion:	
		registered office address only. (Same Corporate name)	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	l "corporai <u>:</u> .	tion" or "incorporated" or the abbreviation "Corp." or "I	nc."
B. Enter new principal office address, if applica (Principal office address <u>MUST BE A STREET A</u>	ble: DDRESS	) 8075 SW 107 AVE. APT 215	
		MIAMI FL 33173	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u> )	8075 SW 107 AVE. APT 215	
		MIAMI FL 33173	
D. If amending the registered agent and/or reginew registered agent and/or the new register	ed office a	address:	
Name of New Registered Agent:	RONALI	DO ADRIAN MOREIRA	
	8075 SW	7 107 AVE. APT 215	
New Registered Office Address:		(Florida street address)	
NEW RESISTER Office / Mary Con-	MIAMI	, Florida	
		(City) (Xip(Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered u. lam fa	imiliar with and ascept the orligations of the position.	<b>&gt;</b>
-	S	Signature of New Registered Agent of changing	ILED

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	nge <u>PT John Doc</u> nove <u>V Mike Jones</u>				
Type of Action (Check One)	Title	Name	Address		
1) × Change Add	Р	SERGIO ROSALES	15382 SW 177 TERR. MIAMI FL 33187		
Remove 2) Change Add	<u>v</u>	JAIME AVELLAN	10721 SW 151 ST MIAMI FL 33176		
Remove 3) Change × Add	TR	MARTA LIGIA SALAZAR S.	8480 SW 154 CIRCLE CT.  APT. #911  MIAMI FL 33193		
Remove 4) × Change Add	FISCAL	MARCO ANTONIO PETERSON	2345 SW 128 AVE. MIAMI FL 33175		
Remove  5) × Change Add	FISCAL.	JERYY EMIL BRAUTIGAM	12673 SW 146 TERR. MIAMI FL 33186		
Remove  6) × Change Add	<u>s</u>	RONALDO ADRIAN MOREIRA	8075 SW 107 AVE. APT -215 MIAMI FL 33173		
Remove  E. If amending or additional sheet	ng additional Art ets, if necessary).	icles, enter change(s) here: (Be specific)			

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The date of each amendment(s) adopt	ion: 4/3/2021			if other than the
date this document was signed.				
Effective date <u>if applicable</u> : 4/3/2021				<del></del>
	(no more than 90 da			
Note: If the date inserted in this block of document's effective date on the Depart	does not meet the application of State's records	cable statutory filin	g requirements, this	date will not be listed as the
Adaption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adopt was/were sufficient for approval.	ted by the members and	the number of vot	es cast for the amend	ment(s)

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	4/3/2021	
Signatur	(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)	
	RONALDO ADRIAN MOREIRA	
	(Typed or printed name of person signing)	
	SECRETARY	

(Title of person signing)