N10000000297

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(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
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Amera Thuis 11-19-10

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Phi Mu Alpha Sinfunia Rho Eta Chapter INC. N1 0000000297 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Alejandro Simencz
(Name of Contact Person) Phi Mu Alpha Sinfonia Rho Eta Chapler INC.
(Firm/Company)

1200 SW. 8th St WPAC 142 Miami, FL 33199

(Address) Miami FL
(City/ State and Zip Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Alejandro Jimenez at (786) 343-2276
(Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

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

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

Street Address

Articles of Amendment to Articles of Incorporation of

Phi Ma Alpha Sinfor	ا مند	the Eta	Chapter INC.	
(Name of Corporation as currently file	ed with th	e Florida Dept. of	State	
N1. 000000	0) 29	7		
N 1 000000 (Document Number of C	Corporation	n (if known)		
Pursuant to the provisions of section 617.1006, Florida the following amendment(s) to its Articles of Incorporate		his <i>Florida Not Fo</i>	or Profit Corporation adopt	S
A. If amending name, enter the new name of the cor	rporation:			
The new name must be distinguishable and contain the abbreviation "Corp." or "Inc." "Company" or "Co."				
B. Enter new principal office address, if applicable:	_			
(Principal office address <u>MUST BE A STREET ADDI</u>	RESS)	_		
	_	_	ZOID TALL!	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	a			ı
(maining data ess militable in 1700 to 1710 box	·			l
	-		17-4 0°	,
	-		27 <u>2</u>	
D. If amending the registered agent and/or registere new registered agent and/or the new registered of			enter the name of the	
Name of New Registered Agent:				
New Registered Office Address:	(Florida	a street address)		
			, Florida 	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regis	stered Age	ent:		
I hereby accept the appointment as registered agent. position.			ccept the obligations of the	?
Signature	e of New R	egistered Agent, if	Cchanging	

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)

<u>Title</u>	Name	Address	Type of Action
<u>Trea</u>	(Previous transmir)	8420 SW. 133 ave rd 201 Minni, FL 33183 US	Add Remove
Pres	Miquel A Sourcen (Policies Pusident)	10 201 SW 37 Herr Mirmi, PL 33165	☐ Add ☑ Remove
<u>Pres</u>	Ivan Catalan (President)	4511 Sheidan ave Misai Buch, FL 33140	M Add □ Remove
(attach addi	g or adding additional Articles, enter c tional sheets, if necessary). (Be specific		
Please	- Add the new off	icer as treasurer	<u>; </u>
<u></u>	- Add the new off Alejandro J:manez	103 55 SW. 4	other ant sic
	V	Miami H	-33165
		/	
		(A) 381 V 31 B	
			<u> </u>
.			
			

The date of each amendment(s) adoption:	8-22-10
Effective date if applicables	(date of adoption is required)
Effective date <u>if applicable</u> : (no mod	re than 90 days after amendment file date)
Adoption of Amendment(s) (CF	IECK ONE)
☐ The amendment(s) was/were adopted by the was/were sufficient for approval.	members and the number of votes cast for the amendment(s)
There are no members or members entitled adopted by the board of directors.	to vote on the amendment(s). The amendment(s) was/were
Dated Nov 9	2010
have not been select	vice chairman of the board, president or other officer-if directors ed, by an incorporator – if in the hands of a receiver, trustee, or if fiduciary by that fiduciary)
Ivan	Catalan ped or printed name of person signing)
	(Title of person signing)