N10000001642

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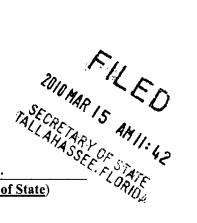
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Hispanic Food	d & Beverage Foundation	on, Inc.
DOCUMENT NUM	BER: N10000001642		·
The enclosed Articles	s of Amendment and fee are sul	bmitted for filing.	
Please return all corre	espondence concerning this mat	tter to the following:	
		niel Novela	
	(Name of	f Contact Person)	
	NO	VELA LAW	
	(Firn	n/ Company)	
	1390 Brickell	I Avenue, Suite 200	
	(Address)	
	Miam	ii, FL 33131	
	(City/ Sta	ate and Zip Code)	
	dnovela@ E-mail address: (to be use	novelalaw.com d for future annual report notific	ation)
For further information	on concerning this matter, pleas	ee call:	
Daniel Novela		at (305) 371-671	11
(Name	of Contact Person)	(Area Code & Dayti	me Telephone Number)
Enclosed is a check f	or the following amount made p	payable to the Florida Departmen	t 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)
	ing Address	Street Address	•
	ndment Section ion of Corporations	Amendment Section Division of Corporation	one
	Box 6327	Clifton Building	UIIO
Tallahassee, FL 32314		2661 Executive Cente	r Circle

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**



Hispanic Food & Beverage Foundation, Inc.

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

N10000001642

(Document Number of Corporation (if known)

	e of the corporation:	
new name must be distinguishable and reviation "Corp." or "Inc." "Company		
Enter new principal office address, if a incipal office address <u>MUST BE A STR</u>		
Enter new mailing address, if applical	hlo	
(Mailing address MAY BE A POST OF		
If amending the registered agent and/o	or registered office address in Floric	la. enter the name of th
If amending the registered agent and/o new registered agent and/or the new re		da, enter the name of th
		la, enter the name of th
new registered agent and/or the new re		
new registered agent and/or the new re Name of New Registered Agent:	egistered office address:	

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)

<u>Title</u>	Name	Address	Type of Action
S/T	Michael R. Torres	2121 Ponce De Leon Blvd. Suite 650 Coral Gables, Florida 33134	_ ☑ Add □ Remove
S/T	Carlos Ramirez	501 N.W. 37 Avenue Miami, Florida 33125	Add Remove
William will a discretion			Add Remove
	ding or adding additional Articles, endditional sheets, if necessary). (Be s		

The date of each amendment	s) adoption: February 26, 2010
•	(date of adoption is required)
Effective date if applicable:	
• • • •	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer was/were sufficient for appr	e adopted by the members and the number of votes cast for the amendment(s) oval.
There are no members or madopted by the board of dire	nembers entitled to vote on the amendment(s). The amendment(s) was/were ectors.
Dated_Febru	uary 26, 2010
Signature	O Pan
have	the chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)
	LUIS PARGA
	(Typed or printed name of person signing)
	Vice President/Director
	(Title of person signing)

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