

NI0000004952

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

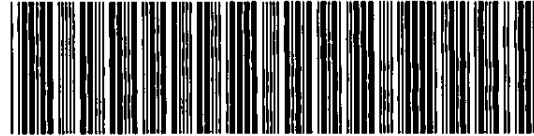
(Business Entity Name)

(Document Number)

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Amend
Cia 6.13.14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MOVIMIENTO DE RETIROS PARROQUIALES JUAN XXIII, INC

DOCUMENT NUMBER: N10000004952

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

Please return all correspondence concerning this matter to the following:

Noel E. Escobar Sr.

(Name of Contact Person)

COMPANY - ACCOUNTANT

(Firm/ Company)

4420 S.W. 77 ave

(Address)

DAVIE, FLORIDA - 33328

(City/ State and Zip Code)

STAR4997 @ AOL.COM

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

For further information concerning this matter, please call:

Noel E. Escobar Sr.

(Name of Contact Person)

at (

954)

474-5425

(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

MOVIMIENTO DE RETIROS PARROQUIALES JUAN XXIII, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known))

A. If amending name, enter the new name of the corporation:

1324 S.W. 112 Way
DAVIE, Fla - 33325

1324 S.W. 112 way
DAVIDE, Fla - 33325

1324 S.W. 112. Way
(Florida street address)

DAVIE, Florida 33325
(City) (Zip Code)

ed agent. I am familiar with and acquainted with the following:

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FILED
JUL 14 1963
FBI - MEMPHIS

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>DP</u>	<u>Luis D. Rico</u>	<u>8962 S.W. 52 STREET</u> <u>COOPER CITY, FLA 33328</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D.S.</u>	<u>AURA M. RICO</u>	<u>8962 S.W. 52 STREET</u> <u>COOPER CITY, FLA 33328</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D.VP</u>	<u>INGRID COHEN</u>	<u>6300 S.O. Falls Circle Dr. #115</u> <u>LAUDERHILL, FLA - 33319</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D.P.</u>	<u>ROBERTO GARCIA</u>	<u>1324 S.W. 112 WAY</u> <u>DAVIS, FLA - 33325</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D.S.</u>	<u>ARACELIS PEREZ</u>	<u>1455 MARTINIQUE C/F#6407</u> <u>WESTON, FLA - 33326</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D.VP</u>	<u>DIóGENES REYES</u>	<u>11251 S.W. 13th St. apt 102</u> <u>Pembroke Pines, FLA - 33025</u>

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

N/A

The date of each amendment(s) adoption: MAY 28, 2014., if other than the date this document was signed.

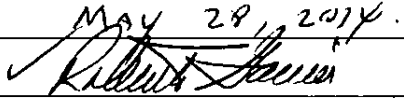
Effective date if applicable: MAY 28, 2014
(no more than 90 days after amendment file date)

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 MAY 28, 2014.

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)

Roberto Garcia

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)