# 11/0000009925

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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 16, 2011

EDUARDO G. HURTADO GONZALES 4405 GARDEN LANE APARTMENT A TAMPA, FL 33610

SUBJECT: HERMANDAD DEL SENOR DE LOS MILAGROS DE TAMPA

FLORIDA, INC

Ref. Number: N10000009425

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Conneil Regulatory Specialist II

Letter Number: 211A00012113

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HAY PUNES: 48 9: 5

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#### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Hermandad de	el Seno	r de los	Milagros o	de Tampa Flori
DOCUMENT NUMB	ER: N10000009425			,	
The enclosed Articles	of Amendment and fee are sub	mitted for	filing.		
Please return all corres	pondence concerning this mat	ter to the f	ollowing:	•	; ; ;
	Eduardo G	Hurtado	Gonzale	s	:
	. (Name of	Contact P	erson)		
			·	<del>ئە</del>	
	Al-ce	ca	(F)	•	
	(Firm	/ Compan	y)		<del></del> ;
				1	
	4405 Ga	rden Ln	Apt A	ek F	
<del></del>		Address)			
	•	·		:	,
	Tampa	a, FL 330	610		
		te and Zip			
		_	·	`	
	aa2.accoun	iting@ya	hoo.com	1	
	E-mail address: (to be use				on)
				r t	
For further information	concerning this matter, please	e call:		1	•
	•				
Eduard	do G Hurtado	at (	813	486-4381	
(Name o	f Contact Person)		(Area Co	ode & Daytime	Telephone Number)
Enclosed is a check for	the following amount made p	ayable to t	the Florida	Department of	f State:
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee &	□ \$43	3.75 Filing	Fee &	□ \$52.50 Filing Fee
Already cashed	Certificate of Status		ed Copy		Certificate of Status
re altachment	-		tional copy	/ is	Certified Copy
		enclo	sed)		(Additional Copy is enclosed)
Mailing	g Address		Street A	ddress	is enclosed)
	ment Section			ent Section	
	n of Corporations			of Corporations	,
P.O. Bo			Clifton B		
Tallahas	ssee, FL 32314		2661 Exe	cutive Center Ci	rcle

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

## Hermandad del Senor de los Milagros de Tampa Florida, Inc (Name of Corporation as currently filed with the Florida Dept. of State)

· · · · · · · · · · · · · · · · · · ·	antiy med with t		<u></u> )			
N100	000009425					
(Document Number of Corporation (if known)						
Pursuant to the provisions of section 617.1006, the following amendment(s) to its Articles of Inc.	Florida Statutes, corporation:	this <i>Florida Not For P</i>	rofit Corporation adopts			
A. If amending name, enter the new name of	the corporation	<u>:</u>				
The new name must be distinguishable and coabbreviation "Corp." or "Inc." "Company" or			orporated" or the			
B. Enter new principal office address, if appl (Principal office address MUST BE A STREET						
(1 rincipal office address MOST BE A STREET	( ADDKESS )		क्षेत्र 🗻			
			100 3 mm			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		r	7ARY			
(manual manual m		,	S			
			· · · · · · · · · · · · · · · · · · ·			
D. If amending the registered agent and/or re	egistered office a	address in Florida, ent	er the name of the			
new registered agent and/or the new registered	tered office add	ress:	;			
Name of New Registered Agent:	Eduardo G	Hurtado Gonzales	_			
	4405 Ga	arden Ln Atp A				
New Registered Office Address:	(Floria	la street address)	<del></del>			
	٦	Гатра .	Florida 33610			
-		(City)	_, Florida 33610 (Zip Code)			
New Registered Agent's Signature, if changing						
I hereby accept the appointment as registered position.	agent. I am fo	amiliar with and accep	t the obligations of the			

Page 1 of 3

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>	<u>Name</u>	Address	Type of Action
<u>D</u>	Carlos H Suarez	17863 Cinnigham Ct Land O Lakes, FL 34638	☑ Add □ Remove
<u>D</u>	Jose G Fajardo	15911 Mystic Way Tampa, FL 33624	
		4	□ Add □ □ Remove
E. If amen	ding or adding additional Articles, additional sheets, if necessary). (Be	enter change(s) here: specific)	
		:	
			<del></del>
		X	
		···	

The date of each amendmen	nt(s) adoption: 05/03/2011
、 Effective date <u>if applicable</u> :	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of d	members entitled to vote on the amendment(s). The amendment(s) was/were irectors.
Dated 05/	19/2011
Signature _	Account.
ha	y the chairman or vice chairman of the board, president or other officer-if directors ve not been selected, by an incorporator – if in the hands of a receiver, trustee, cher court appointed fiduciary by that fiduciary)
	Eduardo G. Hurtado Gonzales
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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