N1000000000360

(Re	equestor's Name)	
(Ad	Idress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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COVER LETTER

TO:	Amendment Section	
	Division of Corporations	

Division of Corporations		
NAME OF CORPORATION:	MBIAN AMERIC	AN ORGANIZATION, INC.
N1000010	360	
DOCUMENT NUMBER: 14 100000 10		
The enclosed Articles of Amendment and fee are sub-	nitted for filing.	
Please return all correspondence concerning this matter	er to the following:	
DIANA JELEN		
	(Name of Contact Person	1)
JELEN ACCOUNTING S	SERVICES,	INC.
	(Firm/ Company)	
8181 NW 36 STREET S	UITE 13AB	
	(Address)	
DORAL, FL. 33166		
	(City/ State and Zip Cod	e)
JELENACCOUNTIN	GSERVICES	@GMAIL.COM
E-mail address: (to be used	for future annual report	notification)
For further information concerning this matter, please	call:	
DIANA JELEN	at (305	, 591-9180
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	artment of State:
■ \$35 Filing Fee		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Boy 6327	Amend Divisio	Address Iment Section on of Corporations Building

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

UNITED COLOMBIAN AMERICAN ORGANIZATION, INC.

(Name of Corporation as currently filed with the Flo	rida Dept. of State)	
N10000010360		
(Document Number of Corpor	ation (if known)	
tursuant to the provisions of section 617.1006, Florida Statutemendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit Corp</i>	poration adopts the following
. If amending name, enter the new name of the corporat	<u>ion:</u>	
UNITED COLOMBIAN AMERICAN F	OUNDATION, INC.	The nev
ame must be distinguishable and contain the word "corpora	tion" or "incorporated" or the abb	reviation "Corp." or "Inc."
Company" or "Co." may not be used in the name.		
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	
		<u></u>
		12 FEB
Enter new mailing address, if applicable:		C.
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
 If amending the registered agent and/or registered offinew registered agent and/or the new registered office agent. 		ime of the
Name of New Registered Agent:		
Name of New Registered Agent.		_
	(Florida street address)	_
<u>New Registered Office Address</u> :		
	, Florid	a
(City)	(Zip	Code)
lew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa		ons of the position.
, ,,		v 1
C' (A) D	tered Agent if changing	_

Page 1 of 4

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: XChange	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add Remove			
2) Change Add Remove			
3) Change Add Remove		_	
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)	
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The date of each amendment	(s) adoption: 02/11/2012
Effective date if applicable:	02/11/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/w was/were sufficient for ap	were adopted by the members and the number of votes cast for the amendment(s) oproval.
There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were directors.
Dated 02/	11/2012 //
(By the have r	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 iduciary by that fiduciary)
ALFRE	DO SANTAMARIA
PRESI	(Typed or printed name of person signing) DENT
	(Title of person signing)