N10360

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TO: Amendment Section Division of Corporations

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NAME OF CORPORATION:	le Association , ,
N10360 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
Rafael Puga	
	(Name of Contact Person)
Florida Foreign Trade Association	$\frac{1}{2} \left(\frac{1}{2} \right) \right) \right) \right) \right)}{1} \right) \right)}{1} \right)} \right)} \right)} \right)} \right)} \right)} \right)} \right)}} \right)}}$
	(Firm/ Company)
2335 SW 107th Avenue, Suite 2M30 Box 28	$\frac{\partial u}{\partial t} = \frac{\partial u}{\partial t} + \frac{\partial u}{\partial t} = \frac{\partial u}{\partial t} + \frac{\partial u}{\partial t} = $
	(Address)
Doral, Florida, 33172	(City/ State and Zin Code)
	(City/ State and Zip Code)
info@ffta.com	$\mathcal{M}_{\mathrm{tot}}$. The second section $\mathcal{M}_{\mathrm{tot}}$
E-mail address: (to be used	d for future annual report notification).
For further information concerning this matter, please	call:
Miguel Barba	305-471-0737 at
(Name of Contact Person	
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed) \$\int_{\text{C}}^{\text{\$43.75}}\$ Filing Fee 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

Articles of Amendment to to Articles of Incorporation of

Miami Foreign Trade Association

(Name of Corporation as cu	irrently filed with the Florida D	Sept. of State)	•
N10360			
(Document N	Number of Corporation (if known)	• • •
Pursuant to the provisions of section 617.1006, Florida S mendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For Pro	fit Corporation a	dopts the following
. If amending name, enter the new name of the corp	oration:		-
			The nev
ame must be distinguishable and contain the word "cor Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable:	poration" or "incorporated" or	the abbreviation	"Corp." or "Inc."
Principal office address <u>MUST BE A STREET ADDR</u>	ESS)		三二 十
			200 P
			200 - 5
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
	- •		
•			•
			·
 If amending the registered agent and/or registered new registered agent and/or the new registered of 		r the name of the	<u>e</u>
;	2.00 8.00 0.00		
Name of New Registered Agent:		 	
			·
New Registered Office Address:	(Florida s	street address)	
ivew Registerea Office Address.			
		, Florida	·
•	(City)	(Zip	Code)
lew Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I described the supposition of the supposi		bligations of the	position.
	Signature of New Registered	Agent, if changin	g

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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doo Mike Jor Sally Sm	<u>nes</u>	· .		·
Type of Action (Check One)	<u>Title</u>		<u>Name</u>			Address
1) Change	TD	_	Matto, Jose \	1. 1		2335 NW 107th Ave. Suite 2M30,
Add						Box 28, Doral, FL 33172
X Remove						
2) Change	VP	_	Jordan, Denniss	·	•	2335 NW 107th Ave. Suite 2M30,
Add						Box 28, Doral, FL 33172
Remove 3) Change	VP	_	Carrasquillo, Dennis	to as to		2335 NW 107th Ave. Suite 2M30,
X Add						Box 28, Doral, FL 33172
Remove						
4) Change	VP		Enamorado, Arturo			2335 NW 107th Ave. Suite 2M30,
X Add						Box 28, Doral, FL 33172
Remove			•			
5) Change						
Add						
Remove				,		
6) Change		. .		<u>.</u>		
Add						
Remove						

mending or adding addition och additional sheets, if neces	sary). (Be specif	ic)		
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1	10/28/2015	
The date of each æmendntent(s) adop		, if other than the
late this document was signed.		
10/28/2	2015	
Effective date <u>if applicable</u> :		<u></u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block locument's effective date on the Department.	does not meet the applicable statutory filing requirements, this date wil rtment of State's records.	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop was/were sufficient for approval.	oted by the members and the number of votes cast for the amendment(s)	
adopted by the board of directors.	rs entitled to vote on the amendment(s). The amendment(s) was/were	
Dated		
Signature	/4	
(By the chairma	an or vice chairman of the board, president or other officer-if directors	
	selected, by an incorporator – if in the hands of a receiver, trustee, or	
other court app	pointed fiduciary by that fiduciary)	
Rafael Puga	a a	
	(Typed or printed name of person signing)	
President		
	(Title of person signing)	