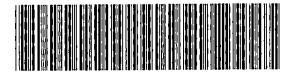
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(Re	equestor's Name)	<del></del>
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	J. HOS	RNE 6 2023

Office Use Only



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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: VOIUSICE	Hispanic	Chamber of Commerce lin
DOCUMENT NUMBER: NUODOOS	3547	
The enclosed Articles of Amendment and fee are sub-	mitted for filing.	
Please return all correspondence concerning this matter	-	
Lourdes L	(Name of Contact Person	n)
Volusia Hispanic Cham		
505 Deltona Blvd.	Ste 103 (Address)	
Deltona, FL 32	725 (City/ State and Zip Cod	e)
president & volus		
For further information concerning this matter, please	•	
Cassie Landon (Name of Contact Person		1886-218-4490 rea Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made pa		•
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section		Address Iment Section
Division of Corporations		on of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment

to

. Articles	of Incorporation	2023 JUI
Volusia Hispanic Chamber (Name of Corporation as currently filed with the Florida D	of Commuce	1. 100 State 1011
NUCACCA	3C/17	"· .
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit C</i>	Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:	
HISTORIC Chamber of Car name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	nmerce of Centra ion" or "incorporated" or the c	I Flor cla, In C. The new abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	505 Delton Deltona, Flori	a Blyd. Ste 103 ida 32725
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	505 Deltona f Deltona, FL 3	· -
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac		2 name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street	address)
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan		utions of the position.

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)

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:  X Change X Remove X Add	PT V SV	John Do Mike Jo Sally St	nes	
Type of Action (Check One)	Title		Name	Address
1) Change Add		<u>.</u>	·	
Remove			-	
2) Change Add		-		
Remove 3 ) Change Add Remove		-	-	
4) Change Add		_		
Remove 5) Change Add		-		
Remove 6) Change Add		-	-	
E. If amending or addin (attach additional shee			cles, enter change(s) here: (Be specific)	
	<del> </del>	-		
		<u></u>		
		<u>-</u>		

•	
	<u> </u>
The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:  (no more than 90 days ofter of the second	mendment file date)
Note: If the date inserted in this block does not meet the applicable stardocument's effective date on the Department of State's records.	

■ The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

Dated	07/06/2023
Signatu	(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)
	Cassie Landron (Typed or printed name of person signing)

(Title of person signing)