

# 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N11000006506

FILED  
Mar 22, 2014  
Secretary of State

Entity Name: VOTODONDESEA FOUNDATION INC.

## Current Principal Place of Business:

1794 OPECHEE DR  
MIAMI, FL 33133

## New Principal Place of Business:

9705 COSTA DEL SOL BLVD.  
DORAL, FL 33178 US

## Current Mailing Address:

1794 OPECHEE DR  
MIAMI, FL 33133

## New Mailing Address:

9705 COSTA DEL SOL BLVD.  
DORAL, FL 33178 US

FEI Number: 45-2758312

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD., SUITE A  
TAMPA, FL 33612 US

## Name and Address of New Registered Agent:

SOLLAMI, GILDA  
1111 SW 1ST AVE.  
APT. 3920  
MIAMI, FL 33130 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: GILDA SOLLAMI

03/22/2014

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P/D  
Name: MARIO, DI GIOVANNI A  
Address: 9705 COSTA DEL SOL BLVD.  
City-St-Zip: DORAL, FL 33178 US

Title: T/D  
Name: SOLLAMI, GILDA  
Address: 1111 SW 1ST AVE. APT. 3920  
City-St-Zip: MIAMI, FL 33130 US

Title: S/D  
Name: DURAN, VANESSA  
Address: 6545 NW 39TH TERRACE  
City-St-Zip: BOCA RATON, FL 33496 US

Title: D  
Name: TORRES, GABRIELA  
Address: 79 SW 12TH ST. APT. 3902  
City-St-Zip: MIAMI, FL 33130 US

Title: D  
Name: CONTRERAS, GABRIELA  
Address: 2412 COUNTRY CLUB PRADO  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: D  
Name: HERRRA, CARLOS  
Address: 6703 NW 7TH ST.  
City-St-Zip: MIAMI, FL 33126 FL

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARIO DI GIOVANNI

P/D

03/22/2014

Electronic Signature of Signing Officer or Director

Date