N11000007166

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: TRAVEL FOR O	CHILDREN OF LATIN AMERIC	CAN INC
DOCUMENT NUM	1BER: N11000007166	- Walter	
The enclosed Article	es of Amendment and fee are s	submitted for filing.	
Please return all corr	respondence concerning this m	natter to the following:	
FRE	DDY PIZARRO		
	(Name	of Contact Person)	
TRA	VEL FOR CHILDREN OF I	···	
	(F)	irm/ Company)	
232	7 NW 9TH TERRACE,		
\$	÷	(Address)	
CAF	PE CORAL, FL 33993		
	(City/S	State and Zip Code)	
	E-mail address: (to be i	used for future annual report notifi	cation)
For further informat	ion concerning this matter, ple	ease call:	
FREDDY PIZARR	0	at (_239)_245020	2
(Name	e of Contact Person)	(Area Code & Day)	time Telephone Number)
Enclosed is a check	for the following amount mad	e payable to the Florida Departme	ent of State:
☑\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ehassee, FL 32314	Street Address Amendment Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3236	tions ter Circle

Articles of Amendment to Articles of Incorporation of

TRAVEL FOR CHILDREN OF LATIN AMERICAN INC

(Name of Corporation as currently filed with the Florida Dept. of State)

N11000007166

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

The new name must be distinguishable a abbreviation "Corp." or " Inc." <u>"Compan</u>		
3. Enter new principal office address, if Principal office address <u>MUST BE A ST</u>		
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		
new registered agent and/or the new		ida, enter the name of the
D. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent: New Registered Office Address:		
new registered agent and/or the new Name of New Registered Agent:	registered office address:	

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them

Title(s)	<u>Name</u>	Addı	ress	
1)VP	ENNA PIZARRO	2327 NW 9 ⁻ CAPE CORAL, F	TH TERRACE L 33993	
2) ?	Freddy Pizamo	2327 NW	9th Terrace L. FL 33793	
3)				
4)				
5)		_		
6)				
If REMOVING an of removed:	fficer and/or director, please	e list the title(s) and na	me of the officer/director to	<u>be</u>
Title(s)	Name	Title(s)	<u>Name</u>	
1)		4)		
2)		5)	•	
3)		6)		

f amending or adding additional Art attach additional sheets, if necessary).	(Be specific)		
		·· <u></u>	<u>-</u>
			······································
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		.	
			
			<u> </u>
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The date of each amendment(s) ad	loption: 11/08/2011
	(date of adoption- required)
Effective date if applicable:	The state of the s
(no	more than 90 days after amendment file date)
•	
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)
There are no members or member adopted by the board of directors.	rs entitled to vote on the amendment(s). The amendment(s) was/were
Dated_11/08/201	1
Signature	MM / 7 / G/1/
	hairman or vice chairman of the board, president or other officer-if directors been selected, by an incorporator – if in the hands of a receiver, trustee, o
	irt appointed fiduciary by that fiduciary)
	FREDDY PIZARRO
	(Typed or printed name of person signing)
	President.
	(Title of person signing)

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