Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H12000017317 3)))



H120000173173ABCA

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : CSH SERVICES, LLC

Account Number : I20070000160

Phone : (800)494-3124

Fax Number : (561)455-9865

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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S COR AMND/RESTATE/CORRECT OR O/D RESIGN INTERNATIONAL FREE AND ACCEPTED MODERN MASONS, INC &

The parties of the Constitution of the Constit	<u> </u>
Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Amend

M1-23-12

FILED

Articles of Amenda 19: 33 to H12000017317 3 Articles of Incorposition TARY BE STATE

	of TALL	AHASSEE FLORIC	E)A
International Free and Acce	pted Modern M	lasons, Inc & C	order of the Easte
(Name of Corporation as cur	rently filed with the	Florida Dept. of Str	ate) SHIMNG SHALL
N1:	2000000129		
(Document Nu	mber of Corporation	(if known)	"
Pursuant to the provisions of section 617.1006 the following amendment(s) to its Articles of I	5, Florida Statutes, the Incorporation:	is <i>Florida Not For P</i>	rofit Corporation adopts
A. If amending name, enter the new name	of the corporation:		
The new name must be distinguishable and abbreviation "Corp." or "Inc." **Company**	contain the word "c or "Co." may not be	orporation" or "inco used in the name.	orporated" or the
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE			
			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF.)			
D. If amending the registered agent and/or new registered agent and/or the new reg	registered office addressistered office address	dress in Florida, ent is:	er the name of the
Name of New Registered Agent:			-
New Registered Office Address:	(Florida)	2 E	_
New Registerea Office Address:	(Fioriga !	street address)	
		City)	_, Florida
New Registered Agent's Signature, if change		•	(Zip Code)
I hereby accept the appointment as registere position.	4		nt the obligations of the
	Signature of New Res	istered Agent, if cha	nging
	Page 1 of 3		

If smending 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: H12000017317 3 (Attach additional sheets, if necessary)				
Title	Name	Address	Type of Action	
D/T	JUANITA JOACHIM	1660 NW 4TH AVENUE #15C MIAMI, FLORIDA 33138	☐ Add ☑ Remove	
D/T	JUANA MARTINEZ	1660 NW 4TH AVENUE #15C MIAMI, FLORIDA 33136	☑ Add ☐ Remove	
			☐ Add ☐ Remove	
	ding or adding additional Articles, additional sheets, if necessary). (Be	enter change(s) here: specific)		
	······································			
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			<u></u>	
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The date of each amendment(s) adoption:	JANUARY 20, 2012		
Effective date if applicable:	(date of adoption is required)	H12000017317 3	
	nore than 90 days after amendment file	date)	
Adoption of Amendment(s)	CHECK ONE)		
The amendment(s) was/were adopted by the was/were sufficient for approval.	he members and the number of votes ca	est for the amendment(s)	
There are no members or members entitle adopted by the board of directors.	ed to vote on the amendment(s). The an	nendment(s) was/were	
Dated 01/20/2012			
Signature (Stuthe challenger	or vice chairman of the board, president	on other officer if director	
have not been sele	or vice charman of the board, president octed, by an incorporator — if in the har ted fiduciary by that fiduciary)		
	Frances Simmons		
π)	yped or printed name of person signing	(3)	
	President		
	(Title of person signing)	· -	

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