N1200001037

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: Filipino C	Communities of	Central Florida I	nc
DOCUMENT NUMBER: N1200000			
The enclosed Articles of Amendment and fee are s	submitted for filing.		
Please return all correspondence concerning this m	_		
	_		
CRISTINA C. SALIZON			
	(Name of Contact Person	,	
FILIPINO COMMUNITIE	S OF CENTR	AL FLORIDA IN	C.
	(Firm/ Company)		
31235 ORANGE STRE	ET		
	(Address)		
SORRENTO FL 32776	US		
	(City/ State and Zip Code	2)	
FilComCF@gma	ail.com		
E-mail address: (to be u	ised for future annual report r	notification)	
For further information concerning this matter, ple	ase call:		
CRISTINA C. SALIZON	N ₃₁ 352	<u>516-3852</u>	
(Name of Contact Person)	(Area Co	de & Daytime Telephone Numb	er)
Enclosed is a check for the following amount made	e payable to the Florida Depa	rtment of State:	
□ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	& D\$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 Division of Corporations P.O. Box 6327	Amend Divisio	Address ment Section n of Corporations Building	
P.U. DUX 0327	Cillion	Dunning	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Incorporation

FILED

FILIPINO COMMUNITIES OF CENTRAL FLORIDATING 24 PM 4: 41

(Name of Corporation as currently filed wi N12000001037	th the Florid	a Dept. of State)	SECRETARY OF STATE TALLAHASSEE, FLORID	ļ
(Document Number	of Corporatio	on (if known)	The state of the s	
cursuant to the provisions of section 617.1006, Florimendment(s) to its Articles of Incorporation:	ida Statutes, t	his <i>Florida Not Fe</i>	or Profit Corporation adopts th	e follov
a. If amending name, enter the new name of the	corporation	<u>:</u>		
NA				The i
came must be distinguishable and contain the word "Company" or "Co." may not be used in the name		ı" or "incorporate	d" or the abbreviation "Corp."	
The state of the s	Na. N	IA		
 Enter new principal office address, if applical Principal office address <u>MUST BE A STREET Al</u> 	<u>DDRESS</u>)			
	_		<u></u>	_
C. Enter new mailing address, if applicable:		LA		
(Mailing address MAY BE A POST OFFICE E	$\frac{1}{1}$	<u> </u>		_
				
 If amending the registered agent and/or registered agent and/or the new registered. 			, enter the name of the	
NA	ea office add.	<u> </u>		
Name of New Registered Agent:			<u></u>	
				
New Registered Office Address:	(Fic	orida street address)		
			, Florida	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing R	lagistand As	ant.		
New Registered Agent's Signature, it changing R hereby accept the appointment as registered agent			t the obligations of the position	l.
	-			
Signature of)	New Register	ed Agent, if changi	ng	

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) × Change Add Remove	DPT	Cristina Salizon	31235 ORANGE STREET SORRENTO FL 32776 US
2) × Change Add Remove	DV	Hercules Enriquez	8012 OLD TOWN DRIVE ORLANDO FL 32819 US
3) Change X Add Remove	DV	Wencestao Manaloto	1820 Sand Arbor Circle Orlando FL 32824
4) X Change Add Remove	DS	Norma Camoes	3827 HUNTERS ISLE DRIVE ORLANDO FL 32837 US
5) Change Add Remove	<u></u>		
6) Change Add Remove		-	

. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
EIN	45-4421827			
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The date of each amendment(s) a	udoption: 4-17-2012
Effective date <u>if applicable:</u>	17-2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a was/were sufficient for approx	adopted by the members and the number of votes cast for the amendment(s) val.
There are no members or men adopted by the board of direc	nbers entitled to vote on the amendment(s). The amendment(s) was/were tors.
Dated 4-17-2	2012
Signature _	u'i
(By the char have not be	irman or vice chairman of the board, president or other officer-if directors een selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)
CRISTINA	A C. SALIZON
	(Typed or printed name of person signing)
President	, Treasurer, Director
	(Title of person signing)