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R. WHITE JUL 0**9** 2018

COVER LETTER

TO: Amendment Section 'Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: LOGIA MARTHA W	VASHINGTON #18 (ORDEN CAB.	ALLERO DE LA LUZ, INC.
N12000008150 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subm	nitted for filing.		
Please return all correspondence concerning this matte	er to the following:		
Migdalia Medina			
	(Name of Contact Pe	rson)	
LOGIA MARTHA WASHINGTON #18			
	(Firm/ Company)	
1701 NW 17 AVE.			
	(Address)		
MIAMI, FL 33125			
	(City/ State and Zip (lode)	
E-mail address: (to be used	for future annual rep	ort notification	1)
For further information concerning this matter, please	call:		
Damaris McMahon	nt.	561	512-0690
(Name of Contact Person		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida I	epartment of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certif Certif (Addi	0 Filing Fee Teate of Status Ted Copy Tional Copy is Onesed)
Mailing Address Amendment Section Division of Corporations	An	eet Address lendment Sect lision of Corp	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation of



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(Name of Corporation as cu	rrently filed with the Flor	ida Dept. of State)
N12000008150		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Document N	umber of Corporation (if k	nown)
Pursuant to the provisions of section 617,1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corporate	oration:	
name must be distinguishable and contain the word "corp	 poration" or "incorporated	The new I" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.	•	·
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRI</u>	ESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(F	lorida street address)
Hen regarded office factorial		
 -	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Regist hereby accept the appointment as registered agent. I a	ered Agent:	·
	Signature of New Regis	tered 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	<u>V</u> <u>Mi</u>	hn Doe ike Jones Ily Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Change	Tres	Fernandez, Carmen I	1701 NW 17 AVE.
Add			MIAMI, FL 33125
x Remove			
2) Change	Tres	Martin, Martha	701 NW 17 AVE.
x Add			MIAMI, FL 33125
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
to remove her som the Board pentiers				
to remove her som the Board perker's				

	date of each amendment(s) a this document was signed.	doption: 4/12/1	, if other than the
Effe	vtive date <u>if applicable</u> :		
		(no more than 90 days after amendment f	file date)
	2: If the date inserted in this blument's effective date on the D	ock does not meet the applicable statutory filing repartment of State's records.	requirements, this date will not be listed as the
Ado	ption of Amendment(s)	(<u>CHECK ONE</u>)	
	The amendment(s) was/were was/were sufficient for appro-	dopted by the members and the number of votes al.	cast for the amendment(s)
	There are no members or mer adopted by the board of direct	obers entitled to vote on the amendment(s). The cors.	amendment(s) was/were
	Dated	6/6/18	
	have not b	chan or vice chairman of the board, president or een selected, by an incorporator – if in the hands appointed fiduciary by that fiduciary)	
		Migdalia Medir (Typed or printed name of person	n signing)
		500.	