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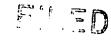
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	EMMAUS INTERNA	ATIONAL FOUNDA	ATION, INC	_
	N13000001017			
DOCUMENT NUMBER:				
The enclosed Articles of An	nendment and fee are subm	nitted for filing.		
Please return all correspond	ence concerning this matter	r to the following:		
HOMERO CRUZ				
		(Name of Contact Po	erson)	
	·	(Firm/ Company	·)	
6187 NW 167 STREET, S	SUITE H24			
		(Address)	,	
MIAMI, FL 33015				
	(City/ State and Zip (Code)	•
EDELAHOZ@CPADELA	HOZ.COM			
E	-mail address: (to be used	for future annual rep	ort notification	n)
For further information conc	erning this matter, please o	:all:		
ERNESTO DE LA HOZ		at	305	860-8340
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made pay	able to the Florida I	Department of S	State:
□ \$35 Filing Fee	✓S43.75 Filing Fee & Certificate of Status		Certifi s Certifi	O Filing Fee icate of Status ied Copy is iconal Copy is issed)
Mailing A		Str	reet Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



2019 JUL -9 AH 9: 05

EMMAUS INTERNATIONAL FOUNDATION, INC. (Name of Corporation as currently filed with the Florida Dept. of State) N13000001017 (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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" 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 MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: ___ (Florida street address) New Registered Office Address: __, Florida ___ New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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>	nn Doe ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	Carlos Santos	6187 NW 167 Street
Add			Suite H24
X Remove			Miami, FL 33015
2) Change	V	Alvaro Murcia	6187 NW 167 Street
Add		······································	Suite H24
X Remove			Miami, FL 33015
3) Change	V	Gregory Gonzalez	6187 NW 167 Street
Add			Suite H24
X Remove			Miami, Fl. 33015
4) Change	V	Jose Jurado	6187 NW 167 Street
Add			Suite H24
X Remove			Miami, FL 33015
5) X Change	P,D	Homero Cruz	6187 NW 167 Street
Add			Suite H24
Remove			Miami, FL 33015
6) X Change	T.D	Ernesto De La Hoz	6187 NW 167 Street
Add	-		Suite H24
Remove			Miami, FL 33015
KUIIOT			

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.

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Example: X Change X Remove X Add	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) X Change	S, D	Armando Guerra	6187 NW 167 Street
Add			Suite H24
Remove			Miami, Fl. 33015
2) Change	D	Mario Garcia	6187 NW 167 Street
X Add			Suite H24
Remove			Miami, FL 33015
3) Change	D	Carlos A. Velez	6187 NW 167 Street
X Add			Suite H24
Remove			Miami, FL 33015
4) Change			
Add			
Remove			
5) Change			.
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articutach additional sheets, if necessary).	(Be specific)			
N/A				
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ľho	he date of each amendment(s) adoption:, if Oil	ier than tho
late	ate this document was signed.	
Effe	ffective date if applicable:	
	(no more than 90 days after amendment file date)	
	ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed beament's effective date on the Department of State's records.	l as the
A do	doption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated JUNE 17, 2019 Signature	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	HOMERO CRUZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	