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## COR AMND/RESTATE/CORRECT OR O/D RESIGN ASOCIACION DE ORQUIDEOLOGIA DE MIAMI INC

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## H13000146280

Articles of Amendment to

to
Articles of Incorporation
of

DIVISION OF COR	7005 U
13 JUN 27 AM	STATE ORATIONS
AM	10:2 <b>6</b>

	Asociación DE ORQUIDEOLOGIA DE	MIAMI. INC
(1)	ame of Corporation as currently filed with the Florida Dept. of State)	
	ASOCIACION DE ORQUIDEOLOGIA DE ame of Corporation as currently filed with the Florida Dept. of State)	348
	(Document Number of Corporation (if known)	
Pursuani amendm	to the provisions of section 617.1006, Florida Statutes, this Florida Not For ent(s) to its Articles of Incorporation:	Profit Corporation adopts the following
A. If an	ending name, enter the new name of the corporation:	
	SOCIACION DE ORQUIDEOLOGIA DE est be distinguishable and contain the word "corporation" or "incorporated	AMERICA INChenew
name m	st be distinguishable and contain the word "corporation" or "incorporated	" or the abbreviation "Corp." or "Inc."
<u>"Compa</u>	ny" or "Co." may not be used in the name,	
		•
	r new principal office address, if applicable; al office address MUST BE A STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·
( <i>Frincip</i>	u Office unitess MUST BE A STRBET AUDIKESS)	,
	· · ·	
		· · · · · · · · · · · · · · · · · · ·
	r new mailing address, if applicable:	
(Mai	ling address MAY BE A POST OFFICE BOX	
	<u> </u>	
		·
D Hor	tending the registered agent and/or registered office address in Florida.	andon the many of the
	registered agent and/or the new registered office address:	enter the mame of the
907	register agent and or the new register of the address.	
;	Name of New Registered Agent:	
		<del></del>
17 D	(Florida street address)	
New Ke	gistered Office Address:	
		, Florida
	(City)	(Zip Code)
	(Cany)	(all com)
New Re	ristored Agent's Signature, if changing Registered Agent:	
	accept the appointment as registered agent. I am familiar with and accept t	he obligations of the position.
		<b>-</b>
	Signature of New Registered Agent, if changing	3
	Page 1 of 4	
	Luxe I at 4	

H13000146280

			#13000146	(	
address (Attach of Please n P = Pres Executive	of each Officer and ditional sheets, one the officer/divident; V= Vice F  Officer; CFO =	and/or Director to if necessary) rector title by the p President; T= Trea	veing added; first letter of the office title; isurer; S= Secretary; D= Director; TR= Officer. If an officer/director holds more	cer/director being removed and title, name,  Trustee; C = Chairman or Clerk; CEO = Chie than one title, list the first letter of each office	ef
a change	, Mike Jones lea		m, Sally Smith is named the V and S. The	he PST and Mike Jones is listed as the V. Ther se should be noted as John Doe, PT as a Chan	
Example X Char X Rem X Add	ige ove	PT         John D           V         Mike It           SV         Sally S	ones		
Type of (Check (		<u>Title</u>	Name	Address	
1)	Change	1	BERTA PRADO	4631 SW 11 st. MIA	M, FL 3134
<u>/</u>	Add Remove				
2)	Change		·		
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2.	If an	ending or adding the ets,	additional Article for the second sec	cles, enter chan (Be specific)	ge(s) here:	
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					Page 3 of 4	

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		H 13000146280
Tbe	date	e of each amendment(s) adoption: 6-26-/3
Effe	ctiv	e date <u>if applicable</u> :  (no more than 90 days after amendment file date)
•		(no more than 50 days after directables after
Adg	ptio	n of Amendment(s) (CHECK ONE)
乜		amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) s/were sufficient for approval.
		ore are no members or members entitled to vote on the amendment(s). The amendment(s) was/were opted by the board of directors.
		Dated 6-26-13 Signature Bester France
	i	(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)
		BERTA PRADO
		(Typed or printed name of person signing)
		TREASURE
		(Title of person signing)

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