## N13000011019

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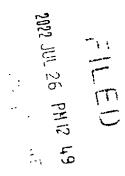
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A. RAMSEY

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

CORAL WAY C	OLOMBIAN LIONS CL	.UB	
N13000011019			
DOCUMENT NUMBER:			<del></del>
The enclosed Articles of Amendment and fee are s	submitted for filing.		
Please return all correspondence concerning this m	natter to the following:		
MARTHA ISABEL SUAREZ			
	(Name of Contact Pe	rson)	-
CORAL WAY COLOMBIAN LIONS CLUB			
	(Firm/ Company	·)	
9040 SW 125TH AVE APT D-208			
	(Address)		· · · ·
MIAMI FL 33186			
	(City/ State and Zip (	Code)	
martha82suarez@gmail.com			
E-mail address: (to be u	ised for future annual rep	ort notification	1)
For further information concerning this matter, ple	ease call:		
MARTHA ISABEL SUAREZ	at	305	904-4856
(Name of Contact Per			(Daytime Telephone Number)
Enclosed is a check for the following amount mad	e payable to the Florida l	Department of	State:
☐ \$35 Filing Fee ☐\$43.75 Filing Fee Certificate of State		Certif s Certif	O Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	An Div	reet Address nendment Sect vision of Corpo e Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

2022 JUL 25 PHIZ LD

CORAL WAY COLOMBIAN LIONS CLUB INC

CORAL MAY COLOMBIAN FIONS CLOB INC	
(Name of Corporation as currently filed with the Florida Dept. of	Stata
N13000011019	state)
(Document Number of Co	rporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this I amendment(s) to its Articles of Incorporation:	Ilorida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" or "Company" or "Co." may not be used in the name.	"incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
<del></del>	
	<del></del>
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
D. If amending the registered agent and/or registered office addr	ess 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
(City	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	ith 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	PT         John Do           V         Mike Jo           SV         Sally Sr	nes en	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	<u>P D</u>	MARINO SANTACOLOMA	15861 SW 85th Ln Miami FL 33193
x Remove			
2) Change × Add	<u>P D</u>	MARTHA ISABEL SUAREZ	13020 SW 92nd Ave Apt A-208 Miami FlL 33176
Remove 3) Remove × Add Remove	<u>\$</u>	MERCY CERON	7275 SW 90th Street Apt C-413 Miami, FL 33186
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here; (Be specific)	
	. === =		

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The date of each amendment(s) adoption: date this document was signed.	July 7, 2022		, if other than the
Effective date if applicable: July 7, 2022	o more than 90 days after amendment		
			s ha listed on the
<b>Note:</b> If the date inserted in this block does a document's effective date on the Department	not meet the applicable statutory filing of State's records.	g requirements, this date will no	t be listed as the
Adoption 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.

	05 to 0 10 0 0 0
Dated	07/18/2022
	Quantity Sund
	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)
	Martha Isabel Suarez
	Martha Isabel Suarez  (Typed or printed name of person signing)