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ALLARASSEE, FLORIBA

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## **COVER LETTER**

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations	•	
NAME OF CORPORATION: HSPANIC F	PUBLIC RELATIONS	. Assumin
DOCUMENT NUMBER: NIHODOD 12	23	MIAMI CETAPIT
The enclosed Articles of Amendment and fee are submitted for	or filing.	
Please return all correspondence concerning this matter to the	following:	
SONIA DIAZ		
(Name	of Contact Person)	
HSPANIC PUBLICE FLAT	NOVS PSSVZIATIUM irm/Company)	1
2000 Ance de Leon	(Address)	
Coral Gables FC 333	34	
(City/ S	State and Zip Code)	15 SEC
E-mail address: (to be used for fute	ure annual report notification)	JAN 21 ARCIARY AHASSE
For further information concerning this matter, please call:		Te Z IN
SONIA DINZ	at (305) 45784	
(Name of Contact Person)	(Area Code & Daytime Teleph	one Number)
Enclosed is a check for the following amount made payable to	the Florida Department of State:	
(Add	75 Filing Fee & State Copy State Certificate of State Certified Copy (Additional Copy Enclosed)	cus
Mailing Address	Street Address	

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

MSPANIC PUBLIC RELITIONS ASSOCIATION (MIMMI)

(Name of Corporation as currently filed with the Florida Dept. of State)

EIN: 46-3422507 - NINDDDDD1223

(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 corpora	The new
	ation" 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)	NA NA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA TALLARIAN TAL
	REC. PR
D. If amending the registered agent and/or registered of	Fice address in Florida, enter the name of the
new registered agent and/or the new registered office	address:
Name of New Registered Agent: NI	• •
	(Florida street address)
New Registered Office Address:	(1 a) had sireer data easy
	. Florida
(City	(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am J	
111	

Page 1 of 4

## 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'àdditional 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 D           V         Mike J           SV         Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Ohange	P	DMSY CABREELA	
X Add Remove			
2) X Change	<b>@</b> V	SONIA DIAZ	
Add Remove 3) Change	<u>P</u>	SONIA DIAZ	
Add Remove  4) Change	T	Krysten Ouczadon	
Add  Remove  5) Change Add	T	massie Hernandez	
Remove  Change  Add	<u>V</u>	Jadie Cardoto	
Remove			

E. If amending or adding additional Article (attach additional sheets, if necessary).	<u>cles, enter change(s) here</u> : (Be specific)
D12 <del>0</del> 0	
	·
•	

The date of each amendment(s) adoption: 15 1 2015 date this document was signed.	, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	_
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.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Signature  (By the chairman or vice chairman of the poard, 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)	
(Typed or printed name of person signing)  PREJOENT	

(Title of person signing)