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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PENA MADRIDISTA REAL MADRID DEL SUR DE LA FLORIDA, CO	RP	
DOCUMENT NUMBER: N14000003353		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
YATSUNEY PEREZ-SUAREZ		
Name of Contact Person		
9857 SW 7TH STREET		
Address		
MIAMI, FL 33174	•	
City/ State and Zip Code		
madridistasenmiami@gmail.com		
E-mail address: (to be used for future annual report notification).		
For further information concerning this matter, please call:		
YATSUNEY PEREZ-SUAREZ		
Name of Contact Person Area Code & Daytime Telephone	Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:		
S35 Filing Fee Certificate of Status Certificate Orby (Additional Copy is enclosed)		
Mailing Address Street Address		
Amendment Section Amendment Section Division of Corporations Division of Corporations		
P.O. Box 6327 Christon Building		
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301	,* .;	

Articles of Amendment to Articles of Incorporation of

PENA MADRIDISTA REAL MADRID DEL SUR DE LA FLORIDA, CORP

(Name of Corporation as currently filed with the Florida Dept. of State) N14000003353 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: PENA MADRIDISTA REAL MADRID SUR DE FLORIDA, CORP. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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	PT John Doc	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	Title Name	<u>Addres</u> s
Change Add	<i>N/H</i>	<u> </u>
Remove	,	
2) Change	ν/A	
Add Remove	/	
3) Change	N/A	
Add		
4) Change	N/A	
Add Remove		
5) Change	N/A	,
Add		
Remove 6) Change	WA	
Add		:
Remove		· •·

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
1/0	
10/17	
1	
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	11-8-14-14-1
. If an amendment provides for an exchange, reclassification, or	cancellation of issued shares.
provisions for implementing the amendment if not contained in	the amendment itself:
(if not applicable, indicate N/A)	
1/10	
NH	
· ·	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 04/16/14	
Signature	
(By a director, president or officer – if directors or officers have not been	
selected, by an incorporator \(\subseteq \) if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
appointed inductary by that inductary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President Reg. Agent. (Title of person signing)	
(Title of person signing)	