

N15000002027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

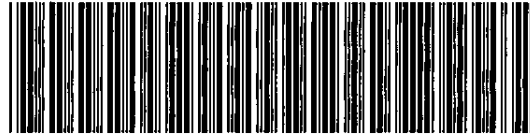
(Business Entity Name)

(Document Number)

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15 NOV 23 PM 2:39
DIVISION OF CERTIFICATES
STATE OF ALABAMA

NOV 24 2015
C LEWIS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 28, 2015

ANDRES MONTEJO, ESQ / LAW OFFICES OF ANDRES MONTEJO
6157 NW 167 ST SUITE F21
MIAMI, FL 33015 US

SUBJECT: FUNDACION MONTILLA INC.
Ref. Number: N15000002027

We have received your document for FUNDACION MONTILLA INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 515A00022838

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FUNDACION MONTILLA INC.

DOCUMENT NUMBER: N15000002027

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANDRES MONTEJO, ESQ.

(Name of Contact Person)

LAW OFFICES OF ANDRES MONTEJO

(Firm/ Company)

6157 NW 167 ST SUITE F 21

(Address)

MIAMI, FL 33015

(City/ State and Zip Code)

amontejo@andresmontejolaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANDRES MONTEJO, ESQ.

(Name of Contact Person)

at (305) 817-3677

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|--|--|---|--|

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 NOV 23 PM 2:40

FUNDACION MONTILLA INC.

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

N15000002027

(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:

N/A

The new 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:

N/A

(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: N/A

(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 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u> </u>	<u> </u>	<u> </u>
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u> </u>	<u> </u>	<u> </u>
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u> </u>	<u> </u>	<u> </u>
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	<u> </u>	<u> </u>	<u> </u>
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change	<u> </u>	<u> </u>	<u> </u>
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

ARTICLE III IS AMENDED AS FOLLOWS:

FUNDACION MONTILLA INC SHALL BE OPERATED EXCLUSIVELY FOR CHARITABLE PURPOSES

(PROVIDING HEALTHCARE, EDUCATION, AND AID TO THE POOR THRU DIVERSE PROGRAMS)

WITHIN THE MEANING OF SECTION 501 (C)(3) OF THE INTERNAL REVENUE CODE.

UPON THE DISSOLUTION OF THE ORGANIZATION. ASSETS SHALL BE DISTRIBUTED FOR ONE OR

MORE EXEMPT PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL

REVENUE CODE OR CORRESPONDING SECTION OF ANY FUTURE FEDEAL TAX CODE, OR SHALL

BE DISTRIBUTED TO THE FEDERAL GOVERNMENT , OR TO A STATE OR LOCAL GOVERNMENT

FOR A PUBLIC PURPOSE. ANY SUCH ASSETS NOT DISPOSED OF SHALL BE DISPOSED OF BY A

COURT OF COMPETENT JURISDICTIONIN THE COUNTY IN WHICH THE PRINCIPAL OFFICE OF THE

ORGANIZATION IS THEN LOCATED, EXCLUSIVELY FOR SUCH PURPOSES OR TO SUCH ORGANI-

ZATION OR ORGANIZATIONS, AS SAID COURT SHALL DETERMINE, WHICH ARE ORGANIZED

AND OPERATED EXCLUSIVELY FOR SUCH PURPOSES.

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Effective date if applicable: _____ 15 NOV 23 PM 2:40
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated OCTOBER 15, 2015

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)

ANDRES VILLAFANA

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)