

N16000002942

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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COR AMND/RESTATE/CORRECT OR O/D RESIGN
HOSPITALITA HEALTHCARE FOUNDATION, INC.

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OCT 23 2020

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Corporate Filing Menu

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2020 OCT 22 PM 2:34
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Articles of Amendment
to
Articles of Incorporation
of

HOSPITALITA HEALTHCARE FOUNDATION, INC.

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

N16000092442

(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:

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:

(Principal office address MUST BE A STREET ADDRESS) 8333 NW 53rd St Suite 411

MIAMI, FL 33166

C. Enter new mailing address, if applicable:

(Mailing address MUST BE A POST OFFICE BOX)

8333 NW 53rd St

MIAMI, FL 33166

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:

JULIA M. A. OSTAMOLERO

8333 NW 53rd St Suite 411

(Florida Mailing Address)

New Registered Office Address:

MIAMI

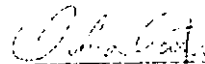
Florida 33166

(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

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2020 OCT 22 PM 2:34

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 abbreviation.

P = President, V = Vice President, T = Treasurer, S = Secretary, D = Director, TP = 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: Current: John Doe is listed as the PTD and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named as the new S. This should be noted as John Doe, PTD as a Change, Mike Jones, V as Remove, and Sally Smith, S as an Add.

Example

☒ Change	<u>P</u>	<u>John Doe</u>
☒ Remove	<u>V</u>	<u>Mike Jones</u>
☒ Add	<u>S</u>	<u>Sally Smith</u>

<u>Type of Action</u>	<u>Title</u>	<u>Name</u>	<u>Address</u>
(Check One)			

1) ☐ Change	<u>P</u>	<u>BILLY R. OVALLIES RUMBOS</u>	<u>8333 NW 53rd St Suite 401</u>
☐ Add			<u>MIAMI, FL 33166</u>

☐ Remove

2) ☐ Change	<u>P</u>	<u>ROBERTA J. COSTA MOLLER</u>	<u>8333 NW 53rd St Suite 401</u>
☐ Add			<u>MIAMI, FL 33166</u>

☐ Remove

3) ☐ Change			
☐ Add			

☐ Remove

4) ☐ Change			
☐ Add			

☐ Remove

5) ☐ Change			
☐ Add			

☐ Remove

6) ☐ Change			
☐ Add			

☐ Remove

F. If amending or adding additional Articles, enter change(s) here

(Attach additional sheets, if necessary.) (the apostrophe)

The date of each amendment(s) adoption: 10/20/2020 if other than the date this document was signed

Effective date if applicable: _____
(Indicate the date when the amendment(s) become effective.)

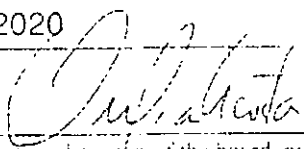
Note: If the date inserted in the above line is different from the date the amendment(s) were adopted, the document's effective date on the Department of State is _____.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the members and the majority 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 20/10/2020

Signature 

(By the chairman or vice chairman of the board, president or other officer or directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary.)

JULIA M. ACOSTA MOLERO

(Typed or printed name of person signing)

P

(If a person signs)