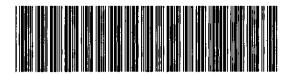
N 16000004293

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
Ų ··		
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Naı	me)
(Do	ocument Number)	•
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



700297833087

04/20/17--01023--003 **43.75

2017 APR 20 AM 7: 59

V HERRING APR 24 2017

COVER LETTER

TO: Amendment Section • **Division of Corporations**

NAME OF CORPORATIO	N: ASPIRA SU	JPPORT ORGANIZ	ATION, IN	1C	
DOCUMENT NUMBER: _	N16000	0004293			- · · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Ame	endment and fee are subm	nitted for filing.			
Please return all corresponder	nce concerning this matter	r to the following:			
ELIZA	BETH V. PATINO, I	ESQUIRE			
		(Name of Contact Per	rson)		
PATI	NO & ASSOCIATES I	P.A.			
		(Firm/ Company)	l		
550 в	iltmore Way, Suit	e 740			
		(Address)			
Coral	Gables, Florida	33134			
	(City/ State and Zip C	ode)		
-	era@aspirafl.org				
E-r	nail address: (to be used t	or future annual repo	rt notification	1)	
For further information concer	rning this matter, please c	all:			
GEORG	E CÂBRERA	at			269-6767
(1)	Name of Contact Person)	at (Area Code)	(Daytime Tele	phone Number)
Enclosed is a check for the fol	lowing amount made pay	able to the Florida De	partment of S	State:	
☐ \$35 Filing Fee	\$43.75 Filing Fee & C Certificate of Status	3\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Ad	dress	Stre	et Address		

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

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

Articles of Amendment to Articles of Incorporation of

FILEU SECRETARY OF STATE DIVISION OF CORPORATION:

ASPIRA SUPPORT ORGANIZATION, INC

2817 APR 20 AM 7: 59

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
N16000004293	
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:
N/Á	The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered offic	
new registered agent and/or the new registered office a	ddress:
Name of New Registered Agent:	N/A
New Registered Office Address:	(Florida street address)
	71. 11
St	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent: miliar with and accept the obligations of the position.
Si	gnature 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: XChange X Remove X Add	<u>V</u> <u>Mik</u>	<u>1 Doe</u> e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P/CEO	GEORGE CABRERA	6100 Blue Lagoon Drive
xAdd			Suite 460
Remove			Miami, FL 33126-2080
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

L. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)		
N/A			
the state of the s			
			· · · · · · · · · · · · · · · · · · ·
		<u> </u>	
			· · · · · · · · · · · · · · · · · · ·
		·····	
	-		
			
			

The date of each amendment(s) adoption	n; May 12, 2016	, if other than the
date this document was signed.	•	
Effective date if applicable:	N/A	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Departme	s not meet the applicable statutory filing requirements, this date nt of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of votes cast for the amendmen	t(s)
adopted by the board of directors.	titled to vote on the amendment(s). The amendment(s) was/were	е
Dated	al P	
Signature (By the chairman or	vice chairman of the board, president or other officer-if director	TS
have not been select	ed fiduciary by that fiduciary)	
G	EORGE CABRERA	
	(Typed or printed name of person signing)	-
	President and CEO	_
	(Title of person signing)	