

09/23/2020

N160000004411

Florida Department of State
Division of Corporations
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Account Number : I20140000049
Phone : (786)837-6787
Fax Number : (305)718-0687

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: eric@epgdllaw.com

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
FUNDACION SALA MENDOZA, INC.**

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FUNDACION SALA MENDOZA, INC.

DOCUMENT NUMBER: N16000004411

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

Please return all correspondence concerning this matter to the following:

ERIC P. GROS-DUBOIS

(Name of Contact Person)

EPGD ATTORNEYS AT LAW, P.A.

(Firm/ Company)

777 SW 37TH AVENUE, SUITE 510

(Address)

MIAMI, FL 33135

(City/ State and Zip Code)

ERIC@EPGDLAW.COM

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

For further information concerning this matter, please call:

ERIC P. GROS-DUBOIS

(Name of Contact Person)

7868376787

at

(Area Code) (Daytime Telephone Number)

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

■ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
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Mailing Address

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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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DIVISION OF CORPORATIONS



July 22, 2020

FLORIDA DEPARTMENT OF STATE

Division of Corporations

FUNDACION SALA MENDOZA, INC.
2701 PONCE DE LEON BLVD., STE. 202
CORAL GABLES, FL 33134

SUBJECT: FUNDACION SALA MENDOZA, INC.
REF: N16000004411

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

The document is illegible and not acceptable for imaging.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Terri J Schroeder
Regulatory Specialist III

FAX Aud. #: H20000192233
Letter Number: 120A00013764

Articles of Amendment
to
Articles of Incorporation
of

FUNDACION SALA MENDOZA, INC.

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

N16000004411

(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 "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)

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:

New Registered Office Address:

(Florida street address)

(City)

, Florida

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

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add	T	SUCRE, JOSE	475 Brickell Avenue, Apt 3609 Miami, FL 33131
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	S	SUCRE, JOSE	475 Brickell Avenue, Apt 3609 Miami, FL 33131
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	S	VELASCO, PATRICIA	AV Araure Residencias Araure 258 Piso 1 Apto 12 Urbanizacion Chuao Caracas, Venezuela, VE
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	T	VELASCO, PATRICIA	AV Araure Residencias Araure 258 Piso 1 Apto 12 Urbanizacion Chuao
<input type="checkbox"/> Remove			Caracas, Venezuela, VE
5) <input type="checkbox"/> Change <input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

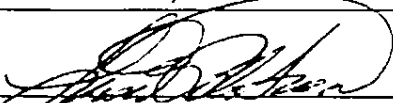
F. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

☐ 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 June 4, 2020

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)

Luisa Pulido

(Typed or printed name of person signing)

President

(Title of person signing)