

NI60000012172

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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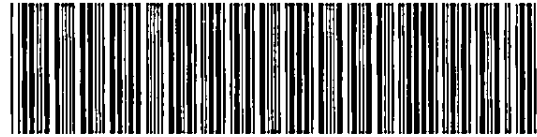
(Business Entity Name)

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2017 AUG 14 AM 9:03
SECRETARY OF STATE
TALLAHASSEE, FL 32310

cc/cis
Amend/Name
chg

AUG 15 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

MagicWaste Foundation, Inc.
NAME OF CORPORATION: _____

N16000012172
DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Rodolfo V. Bustamante

(Name of Contact Person)

(Firm/ Company)

8600 NW 17th Street Suite 130

(Address)

Doral, FL 33126

(City/ State and Zip Code)

rudyb@magicwaste.com

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

For further information concerning this matter, please call:

Rodolfo V. Bustamante

(786)

655-0667

at

(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:

- | | | | |
|--|--|---|---|
| <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 checked="" 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

RB



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 3, 2017

RODOLFO V. BUSTAMANTE
MAGICWASTE FOUNDATION INC
8600 NW 17TH STREET - STE. 130
DORAL, FL 33126

SUBJECT: MAGICWASTE FOUNDATION INC
Ref. Number: N16000012172

We have received your document for MAGICWASTE FOUNDATION INC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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.

Irene Albritton
Regulatory Specialist II

Letter Number: 317A00015788

RECEIVED

17 AUG 14 PM 4:13

DEPT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

MagicWaste Foundation, Inc.

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

N16000012172

(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:

MagicWaste Youth Foundation, Inc.

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)

8600 NW 17th Street Suite 130

Doral, FL 33126

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8600 NW 17th Street Suite 130

Doral, FL 33126

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:

8600 NW 17th Street Suite 130

(Florida street address)

New Registered Office Address:

Doral, Florida 33126

(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

RB

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 checked="" type="checkbox"/> Change	<u>P</u>	<u>Rodolfo V. Bustamante</u>	<u>8600 NW 17th Street Suite 130</u>
<input type="checkbox"/> Add			<u>Doral, FL 33126</u>
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>VP</u>	<u>Evelyn Correa</u>	<u>12741 SW 108th ST.</u>
<input type="checkbox"/> Add			<u>Miami, FL 33186</u>
<input checked="" type="checkbox"/> Remove			
3) <input checked="" type="checkbox"/> Change	<u>VP</u>	<u>Ricardo Moncada</u>	<u>8600 NW 17th Street Suite 130</u>
<input type="checkbox"/> Add			<u>Doral, FL 33126</u>
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>T</u>	<u>Dulce Rodriguez</u>	<u>7925 Nw 12th Street Suite 130</u>
<input type="checkbox"/> Add			<u>Doral, FL 33126</u>
<input checked="" type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	<u>T</u>	<u>Wilma Nazario</u>	<u>8600 NW 17th Street Suite 130</u>
<input checked="" type="checkbox"/> Add			<u>Doral, FL 33126</u>
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change	<u>D</u>	<u>Itzel GLEZ</u>	<u>7925 NW 12th Street Suite 130</u>
<input type="checkbox"/> Add			<u>Doral, FL 33126</u>
<input checked="" type="checkbox"/> Remove			

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

7) Remove	D	Lissette Hermida	7925 NW 17th Street Suite 130
			Doral, FL 33126

8) Add	D	Rosa M Carreras	8600 NW 17th Street Suite 130
			Doral, FL 33126

9) Add	D	Frank Robleto	8600 NW 17th Street Suite 130
			Doral, FL 33126

10) Add	D	Elizabeth Meseguer	8600 NW 17th Street Suite 130
			Doral, FL 33126

11) Add	D	Catalina Febles	8600 NW 17th Street Suite 130
			Doral, FL 33126

LS

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)

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 7-26-2017 _____

Signature Rodolfo V. Bustamante
(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)

Rodolfo V. Bustamante

(Typed or printed name of person signing)

President

(Title of person signing)