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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

ESPE	FOUNDATION INC	
N1700000	3731	
DOCUMENT NUMBER:		
The enclosed Articles of Amendment a	nd fee are submitted for filing.	
Please return all correspondence concer	ming this matter to the following:	
NAEMAR BELTRAN		
	(Name of Contact Per	son)
DAVOSFINANCIAL CORP		
	(Firm/ Company)	
2665 S. BAYSHORE DR SUITE 810		
	(Address)	
MIAMI FL 33133		
	(City/ State and Zip C	ode)
F. mail addra	ess: (to be used for future annual repo	art notification)
		nt notification)
For further information concerning this	matter, please call:	
NAEMAR BELTRAN		305-5778999
(Name of C		(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following at	nount made payable to the Florida D	epartment of State:
	is Filing Fee & \$\Bigsigs\$\$ \$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\	Certificate of Status
Mailing Address	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

ESPE	COL	DIAL	A TL	ON	INIC
r. SPr	P 1 71	INI)	АІН	I IN	124

(Name of Corporation	n as currently filed with the Florid	a Dept. of State)			
N17000003731					
(Docu	iment Number of Corporation (if kno	wn)			
Pursuant to the provisions of section 617.1006, Flamendment(s) to its Articles of Incorporation:	orida Statutes, this <i>Florida Not For t</i>	Profit Corporation adopts the following			
A. If amending name, enter the new name of the	ne corporation:				
name must be distinguishable and contain the wor "Company" or "Ço," may not be used in the nun	d "corporation" or "incorporated" ne.	The new or the abbreviation "Corp." or "Inc."			
B. Enter new principal office address, if applic		Drb			
		AUG 14			
Enter new mailing address, if applicable:		<i>n</i>			
(Mailing address MAY BE A POST OFFICE	<u>BOX</u>)				
					
		<u></u>			
). If amending the registered agent and/or reg	stered office address in Florida, en	ter the name of the			
new registered agent and/or the new registe	red office address:	No. 100 June 11 Co.			
Name of New Registered Agent:	JORDAN ISNER				
	2505 LAGUNA TERRACE				
Man Danistan 1000 a 411	(Florida street address)				
New Registered Office Address	FORT LAUDERDALE	22217			
	(City)	Florida			
		(Zip Code)			
lew Registered Agent's Signature, if changing hereby accept the appointment as registered agen	Registered Agent:	Naktimeiana aCeka zazieian			
почет иссерстве арринателя иссеруается адет	ii. Tam jamulay wan and accept the	obligations of the position,			
-	Signature of New Registere	d 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: X_Change X_Remove X_Add	<u>V</u> <u>Mi</u>	nn Doe ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D	JORDAN ISNER	2505 LAGUNA TERRACE
X Add			FORT LAUDERDALE FL 33316
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional A attach additional sheets, if necessary)). (Be specific)				
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		7/10/17	
	e date of each amendment e this document was signed	· — — — — — — — — — — — — — — — — — — —	if other than the
	ective date <u>if applicable</u> :	7/10/17	
		(no more than 90 days after amendment file date)	
		is block does not meet the applicable statutory filing requirements, this date will not be I be Department of State's records.	isted as the
Add	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/w was/were sufficient for ap	ere adopted by the members and the number of votes east for the amendment(s) proval.	
	There are no members or adopted by the board of o	members entitled to vote on the amendment(s). The amendment(s) was/were lirectors.	
	7/10/1 Dated	7	
	Signature	M	
	have n	charman or vice chairman of the board, president or other officer-if director of been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	<u> </u>
	NO	RKA MARTINEZ	
		and the distribution of th	
	DIF	JUNUAN 1 2NEK -	သ ဟ
		(Title of person signing)	