## N17000004384

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2022 JAN 24 AM 8: 25 SECRETARY OF STATE

## **COVER LETTER**

TO: Amendment Section Division of Corporations

VENCER FO	OUNDATION INC.		
N17000004384			
DOCUMENT NUMBER:	77.		
The enclosed Articles of Amendment and fee a	re submitted for filing.		
Please return all correspondence concerning thi	s matter to the following:		
CHRISTIAN PEREZ			
	(Name of Contact Pe	erson)	
	W: 10		
	(Firm/ Company	<i>(</i> )	
20710 LEEWARD LN			
	(Address)		
CUTLER BAY, FL 33189			
	(City/ State and Zip	Code)	
CHRISTIANVPEREZ@GMAIL.COM			
E-mail address: (to b	oe used for future annual rep	ort notificatio	n)
For further information concerning this matter,	please call:		
CHRISTIAN PEREZ	at	305	322 - 0834
(Name of Contact)	Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount in	nade payable to the Florida	Department of	State:
■ \$35 Filing Fee □ \$43.75 Filing F Certificate of \$	_	Certi s Certi (Add	0 Filing Fee ficate of Status fied Copy itional Copy is osed)
Mailing Address Amendment Section		reet Address mendment Sect	tion

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

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

## Articles of Amendment to Articles of Incorporation of

## FILED

VENCER FOUNDATION INC.

2022 JAN 24 AM 8: 25

SECRETARY OF STATE TALLAFASSEE, FL (Name of Corporation as currently filed with the Florida Dept. of State) N17000004384 (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; FREEDOM HOUSING FOUNDATION INC. 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST\_BE A STREET ADDRESS ) C. Enter new mailing address, if applicable: N/A (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: N/A Name of New Registered Agent: N/A (Florida street address) New Registered Office Address: , Florida \_\_ (Zip Code) (City) 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. N/A

Signature of New Registered Agent, if changing

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and address of each Offi (Attach additional sheets, Please note the officer/dir P = President; V = Vice F	icer and/ if necess rector titl President; Chief Fi	or Director being added: ary) e by the first letter of the offic T= Treasurer; S= Secretary inancial Officer. If an officer	N/A ce title: c; D= Director; TR= Trust	irector being removed and title, name,  ree; C = Chairman or Clerk; CEO = Chief one title, list the first letter of each office
	ves the co	prporation, Sally Smith is nai		T and Mike Jones is listed as the V. There is ould be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		Address
1) Change Add				
Remove				
2) Change Add				
Remove				

3 ) \_\_\_\_ Change \_\_\_ Add \_\_\_ Remove

4) \_\_\_\_ Change \_\_\_\_ Add

5) \_\_\_\_ Change \_\_\_\_ Add

6) \_\_\_\_ Change \_\_\_\_ Add

N/A

\_\_\_\_ Remove

\_\_\_\_ Remove

\_\_\_\_ Remove

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

		<del></del>
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		<del></del>
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-		<u>.                                    </u>
	10/01/20	
The date of each amendment(s) adoption: date this document was signed.	10/01/20	_, if other than the
Effective date if applicable:	more than 90 days after amendment file date)	
(ne	o more than 90 days after amendment file date)	
Note: If the date inserted in this block does r document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not lof State's records.	be listed as the
Adoption of Amendment(s) (9	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)	

Dat	1/19/2022
1741	
Sigi	ature
	(By the chairman or viol 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 liduciary by that fiduciary)
	CHRISTIAN PEREZ
	(Typed or printed name of person signing)
	CHAIRPERSON