17000004680

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	ENEZUELAN ENGAGEN	ENT FOUNDATION, INC
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee are		
Please return all correspondence concerning this	matter to the following:	
Carlos E. Sardi, Esq.		
	(Name of Contact Pers	on)
Sardi Law PLLC		
	(Firm/ Company)	
225 Alcazar Ave.		
	(Address)	
Coral Gables, FL 33134		
	(City/ State and Zip Co	de)
carlos@sardifaw.com		
E-mail address: (to be u	used for future annual report	notification)
for further information concerning this matter, ple	ease call:	
'arlos E. Sardi	at	95697-8690
(Name of Contact Per		rea Code) (Daytime Telephone Number)
nclosed is a check for the following amount made	e payable to the Florida Dep	sartment of State;
■ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Statu	© \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ameno Divisio	Address Iment Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Taflahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

AMERICAN VENEZUELAN ENGAGEMENT FOUNDATION, INC

(Name of Corporation as currently filed with the Florida I	Dept. of State)	
N 17000004680	,	
(Document Number	er of Corporation (if known)	<u> </u>
Pursuant to the provisions of section 617.1006. Florida Statute amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the	2 following
A. If amending name, enter the new name of the corporati	on:	
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp."	_The new or "Inc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		2020 AI
		JG 13
 If amending the registered agent and/or registered office new registered agent and/or the new registered office ad 	e address in Florida, enter the name of the ldress:	AN 10: 11
Name of New Registered Agent:	•	
New Registered Office Address:	(Florida street address)	
		<u> </u>
	(City) (Zip Code)	
ew Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam	Agent: iliar with and accept the obligations of the position.	
Sign	nature of New Registered Agent, if changing	<u></u>

P = President; V = Vie	rets, if necessary) Adirector title by ce President; T= (() = Chief Finan) the first letter of the office title: Treasurer; S= Secretary; D= Director; 7 wial Officer. If an officer/director holds i	FR= Trustee; C = Chairman or Clerk; CEO = Chief nore than one title, list the first letter of each office
Changes should be no a change, Mike Jones Mike Jones, V as Rem	leaves the corpo	ration, Sally Smith is named the V and S.	as the PST and Mike Jones is listed as the V. There These should be noted as John Doe, PT as a Change
Example: X Change X Remove X Add	<u>V</u> <u>M</u>	hn Doe ike Jones Illy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add X Remove	<u>P/D</u>	Orlando J. Viera Blanco	5223 NW 94th Doral Pl Doral, FL 33178
2) Change Add	<u>D</u>	Gabi Garcia Garcia	5223 NW 94th Doral Pl Doral, FL 33178
X Remove	P/D	Gabi Garcia Garcia	5223 NW 94th Doral Pl Doral, Fl. 33178
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
		al Articles, enter change(s) here: ary). (Be specific)	
N/A			

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*		
The does of such consular sector of such sec		is all and land the
date this document was signed.	on:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department.	oes not meet the applicable statutory filing requirements, this date will no nent of State's records.	ot be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopte was/were sufficient for approval.	d by the members and the number of votes cast for the amendment(s)	

07/30/20 Dated	
Signature	
(By the chairman have not been set	or vice chairman of the board, president or other officer-if director, lected, by an incorporator — if in the hands of a receiver, trustee, or
other court appoi Gabi Garcia C	inted fiduciary by that fiduciary)
other court appoi	inted fiduciary by that fiduciary)

■ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were