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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	cordia, Inc.		
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su	abmitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
Manuel A. Núñez			
	(Name of Contact Pe	rson)	
Mesa de la Misericordia			
	(Firm/ Company)	
150 SE 25th Rd Unit 5C			
	(Address)		
Miami, Florida 33129			
	(City/ State and Zip C	Code)	
mnunez@mesadelamiscricordia.org			
E-mail address: (to be us	sed for future annual rep	ort notification	i)
For further information concerning this matter, plea	ise call:		
Manuel Núñez	at	305	721 5584
(Name of Contact Pers			(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida I	Department of	State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status		Certifi Certifi	O Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section		eet Address	ion

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Mesa de la Misericordia, Inc.			
(Name of Corporation as currently filed with the	Florida D	ept. of State)	
N18000002117			
(Docume	nt Numbe	er of Corporation (if know	wn)
Pursuant to the provisions of section 617,1006, Floridamendment(s) to its Articles of Incorporation:	da Statute	s, this <i>Florida Not For I</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the	<u>corporati</u>	on:	
Not Applicable			The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	"corporat	ion" or "incorporated"	
B. Enter new principal office address, if applicab	le·	150 SE 25th Rd	
(Principal office address MUST BE A STREET AL		#5C	
		Miami, FL 33129	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>OX</u>)	Not Applicable	
D. If amending the registered agent and/or regist	ered offic	ce address in Florida, e	nter the name of the
new registered agent and/or the new registered			<u> </u>
Name of New Registered Agent:	Not Appli	icable	
	150 SE 25	5th Rd. #5C	
-		(Flori	da street address)
New Registered Office Address:			
_	Miami		, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.			e obligations of the position.
	₹′	•	

Signature of New Registered 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	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) × Change Add	<u>PS</u>	Nuncz, Manuel A.	150 SE 25th Rd. #5C Miami, FL 33129
Remove			
2) Change Add	<u>\$</u>	Maldonado, Susana	150 SE 25th Rd. #5C Miami, FL 33129
X Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addir (attach additional shee		cles, enter change(s) here: (Be specific)	
NOT APPLICABLE			
			

		/
	/	
		
/		
/		
The date of each amendment late this document was signed	(s) adoption: November 01, 2020	, if other than the
Effective date <u>if applicable</u> :	November 15, 2020	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in th	is block does not meet the applicable statutory filing requirem	nents, 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	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were				
	adopted by the board of	of directors.				
	Dated Signature (By	November 15, 2020 the chairman or vice chairman of the board, president or other officer-if directors				
	oth	we not been selected, by an incorporator – if in the hands of a receiver, trustee, or the court appointed fiduciary by that fiduciary) Manuel A. Nunez				
		Manuel M. Munez				
	•	(Typed or printed name of person signing)				
		President				
	•	(Title of person signing)				