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COVER LETTER

TO: Amendment Section Division of Corporations

N18000004001			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted for filing	ត.		
Please return all correspondence concerning this matter to the follow	ring:		
(Name of Cor	ntact Person)		
(Firm/ Co	ompany)		
14328 SW 10th Street			
(AbbA)	ress)		
Pembroke Pines, FL 33027			
(City/ State a	nd Zip Code)		
gmfinancialsystemsllc@yahoo.com		Ğ	
E-mail address: (to be used for future ann	nual report notification		
For further information concerning this matter, please call:			50
Jose A Rodriguez		833-7888	
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)	ال
Enclosed is a check for the following amount made payable to the Fl	lorida Department of :	State:	ינ
☑ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing	в п Посо с	0 Filing Fee	

(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

Certified Copy

Enclosed)

(Additional Copy is

Tallahassee, FL 32301

18 JUNITA PHI2: DA

Articles of Amendment to Articles of Incorporation of

STATE ALUMNI FOUNDATION, CORP.

(Name of Corporation as cu	rrently filed with the Flor	ida Dept. of State)
P18000004001		
(Document N	lumber of Corporation (if ki	nown)
Pursuant to the provisions of section 617.1006, Florida Simendment(s) to its Articles of Incorporation:	tatutes, this Florida Not Fo	r Profit Corporation adopts the following
. If amending name, enter the new name of the corp	oration:	
		The new
ame must be distinguishable and contain the word "cor Company" or "Co." may not be used in the name.	poration" or "incorporated	" or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDR</u>	ESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
,		ळं
		enter the name of the
). If amending the registered agent and/or registered		enter the name of the
new registered agent and/or the new registered office address:		ž
Name of New Registered Agent:		<u> </u>
		<u>က်</u>
New Registered Office Address:	<i>eFl</i> e	orida street address)
		, Florida
	(City)	(Zip Code)
Sew Registered Agent's Signature, if changing Regist- hereby accept the appointment as registered agent. I a		the obligations of the position.
	Signature of New Regist	arad Agent it 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>Mil</u>	n <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Τ	Mauricio M Parilli H	Calle Guayacan Res. Los Sauce
X Add			Torre A Apt 36-A
Remove			Porlamar, NE 06301
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
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amending or adding adding adding additional sheets, if	iecessary). (Be sp	pecific)		
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The da	te of each amen	dment(s) adoption:	, if other than the
	s document was		
Effecti	ve date <u>if applic</u>		
		(no more than 90 days after amendment file date)	
		ed in this block does not meet the applicable statutory filing requirements, this date will rate on the Department of State's records.	not be listed as the
Adopti	on of Amendm	ent(s) (<u>CHECK ONE</u>)	
	ne amendment(s) as/were sufficien	was/were adopted by the members and the number of votes cast for the amendment(s) t for approval.	
	here are no mem lopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were and of directors.	
	Dated	06/01/2018	
	Signature		
		(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)	
		Jhonatan Rodriguez	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	