N18000008187

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COVER LETTER

TO: Amendment Section Division of Corporations

NATIONAL O NAME OF CORPORATION:	PRGANIZATION FOR HISPANIC ADVANCEMENT, CORP
N18000008187	
The enclosed Articles of Amendment and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
CRAMER VERDE	
	(Name of Contact Person)
	(Firm/ Company)
2219 ARLINGTON STREET	
	(Address)
SARASOTA FL 34239	
	(City/ State and Zip Code)
CRAMER@CRAMERVERDE.COM	
E-mail address: (to be	e used for future annual report notification)
For further information concerning this matter, p	lease cali:
CRAMER VERDE	941 685-7170 at
(Name of Contact P	
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of St	ee & D\$43.75 Filing Fee & D\$52.50 Filing Fee atus Certified Copy Certificate of Status (Additional copy is enclosed) (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

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



NATIONAL ORGANIZATION FOR HISPANIC ADVANCEMENT, CORP

(Name of Corporation as ei	irrently filed with the Flor	ida Dept. of State)
N18000008187		
(Document)	Sumber of Corporation (if kr	nown)
Pursuant to the provisions of section 617.1006, Florida Samendment(s) to its Articles of Incorporation:	tatutes, this <i>Florida Not Fo</i> r	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	ooration:	
		The new
name 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."
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDR</u>	ESS)	
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	· · · · · · · · · · · · · · · · · · ·	
D. If amending the registered agent and/or registered	Laffian addrace in Florida	antag the game of the
new registered agent and/or the new registered of		enter the name of the
Name of New Registered Agent:		
Name of New Negatorea Argent.	J	***
	(Flo	orida sireet address)
New Registered Office Address:		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist	tered Agent:	
I hereby accept the appointment as registered agent. I d	ım familiar with and accept	the obligations of the position.
	Signature of New Regist.	ered 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 Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) X Change	P CRAMER VERDE	2219 ARLINGTON STREET
Add		SARASOTA FL 34239
Remove		
2) Change		
Add		
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		-
Remove		
б) Change		
Add		
Remove		

Mach adaine	onal sheets, if	necessary).	(Be specific	<i>::</i>)					
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
07/28/2018	
Effective date if applicable: (no more than	90 days after amendment file date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's re-	applicable statutory filing requirements, this date will not be listed as the cords.
Adoption of Amendment(s) (CHECK ON	<u>E</u>)
The amendment(s) was/were adopted by the member was/were sufficient for approval.	s and the number of votes cast for the amendment(s)
There are no members or members entitled to vote of adopted by the board of directors.	the amendment(s). The amendment(s) was/were
Dated	
	of the board, president or other officer-if directors or or other officer of trustee, or that fiduciary)
CRAMER VERDE	
(Туре	d or printed name of person signing)
PRESIDENT/CEO	

(Title of person signing)