

NI 8000008921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

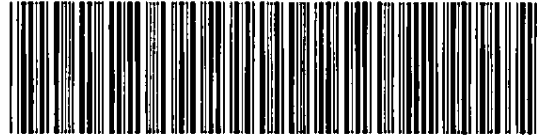
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

0 SIMMONS
FEB 05 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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2019 FEB -1 PM 2:17

SECRETARY OF STATE
TALLAHASSEE, FL

January 15, 2019

INGRID CALVO
7359 SW 82ND ST, APT 7
MIAMI, FL 33143

SUBJECT: MOVIMIENTO ACCION JOVEN NICARAGUA INC
Ref. Number: N18000008921

We have received your document for MOVIMIENTO ACCION JOVEN NICARAGUA INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons
Regulatory Specialist III

Letter Number: 919A00001162

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Movimiento Accion Joven Nicaragua Inc.

DOCUMENT NUMBER: N18000008921

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ingrid A. Calvo

(Name of Contact Person)

(Firm/ Company)

7359 SW 83rd St, Apt 7

(Address)

Miami, FL 33143

(City/ State and Zip Code)

ingridacalvo@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ingrid A. Calvo

(Name of Contact Person)

at (305) 832-9666

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$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
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

Movimiento Accion Jovin Nicaragua Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N18000008921

(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:

Resistencia Atabal Nicaragua Inc.

The new

or

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

Name of New Registered Agent:

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

(Zip Code)

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

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 K. 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action
(Check One)

Title

Name

Address

- 1) ☐ Change ✓ Centeno, Sara M 7359 SW 82nd St
☒ Add Apt 7
☒ Remove Miami, FL 33143
- 2) ☐ Change S Jimenez, Cesar 7359 SW 82nd St
☒ Add Apt 7
☒ Remove Miami, FL 33143
- 3) ☐ Change ✓ Anderson, Dain V 7359 SW 82nd St
☒ Add Apt 7
☐ Remove Miami, FL 33143
- 4) ☐ Change S Zuñiga, Carlos A 7359 SW 82nd St
☒ Add Apt 7
☐ Remove Miami, FL 33143
- 5) ☐ Change _____ _____ _____
☐ Add _____
☐ Remove _____
- 6) ☐ Change _____ _____ _____
☐ Add _____
☐ Remove _____

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

N/A

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The date of each amendment(s) adoption: N/A if other than the date this document was signed.

Effective date if applicable: N/A
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

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 or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 1/3/19

Signature [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)

Ingrid A. Calvo
(Typed or printed name of person signing)

President
(Title of person signing)

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TALLAHASSEE, FLORIDA

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