N18000008921

(Re	equestor's Name)	
(Ad	ldress)	····
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP		MAIL
(Bu	isiness Entity Nan	ne)
(Dc	ocument Number)	<u> </u>
Certified Copies	_ Certificates	of Status
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T. LEMIEUX FEB 2 2 2022

COV	ER	LET	TER

TO: Amendment	Section
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Division of Corporations

SECEIVED

NAME OF CORPORATION	RESISTENCIA AT	TABAL NICARAG	UA INC.	2022 JAN 18	_AM_8:03_
DOCUMENT NUMBER:	N18000008921			SECRI	NATE
The enclosed Articles of Am					, _l_t Man
Please return all corresponde	ence concerning this mat	ter to the following:			
Ingrid Calvo					
	····	(Name of Contact	Person)		
N/A					
		(Firm/ Compa	ny)		
7368 SW 80th ST Plaza. Ap	t 168				
		(Address)			
Miami, FL, 33143					
		(City/ State and Zi	p Code)		
ingridacalvo@gmail.com					
E	-mail address: (to be use	d for future annual r	eport notificati	ion)	
For further information conce	erning this matter, please	e call:			
Ingrid Calvo			305 at	832-9666	
(Name of Contact Persor) (Daytime Telep	hone Number)
Enclosed is a check for the fo	blowing amount made p	ayable to the Florida	a Department o	of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)	is Cert (Ade	50 Filing Fee ificate of Status ified Copy ditional Copy is losed)	
<u>Mailing Ac</u> Amendmen Division of P.O. Box 6 Tallahassee	it Section Corporations 327	A D T 2	treet Address mendment Sec vivision of Corp he Centre of 415 N. Monre allahassee, FL	porations Tallahassee pe Street, Suite 8	10



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 23, 2021

INGRID CALVO 7368 SW 80 ST PLAZA APT 168 MIAMI, FL 33143

SUBJECT: RESISTENCIA ATABAL NICARAGUA INC. Ref. Number: N18000008921

We have received your document for RESISTENCIA ATABAL 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):

The last page of the document can not be read. Also you need have a officer or director sign the last page.

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.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 321A00028321

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

RESISTENCIA ATABAL NICARAGUA INC.

(Name of Corporation as currently filed with the Fl	orida Dept. of State	2)
N1800008921		
(Document	Number of Corpora	ition (if known)
Pursuant to the provisions of section 617,1006. Florida amendment(s) to its Articles of Incorporation:	Statutes, this Floria	la Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the con	rporation:	
FREEDOM FIGHTERS NICARAGUA INC.		
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	prporation" or "ince	The new " prporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADD</u>)	<u>RESS</u>)	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BON</u>	0 <u>N/A</u>	
		222
D. If amending the registered agent and/or registere	d office address in	· · · · · · · · · · · · · · · · · · ·
new registered agent and/or the new registered of	ffice address:	
<u>Name of New Registered Agent:</u>	L	
<u>New Registered</u> Office Address:		(Florida street address)
<u> </u>		ω
	(Citv)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Regist		(<i>Alp</i> Code)

<u>New Registered Agent's Signature, if changing Registered Agent:</u> *I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

Signature of New Registered Agent. if changing

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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 PT John Doe V X Remove Mike Jones X Add SV Sally Smith Type of Action <u>Title</u> Name Address (Check One) APT #1102 MICIMILIA 33143 ZUNIGA, Carlos A secretary 1) \checkmark Change Add Reniove president Alvart2, Cyrthia R 410 PINCLEUT DR miami, FL 3316 Change Add Remove 3) Change Add Remove 4) ____ Change ____ Add ____ Remove 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

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 Fixecutive 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.

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Example: <u>X</u> Change <u>X</u> Remove X Add	PT John I V Mike SV Sally :	Jones	
Type of Action (Check One)	<u>Titlc</u>	Name	<u>Addres</u> s
1) <u>X</u> Change Add	Pr	Cynthia R. Alvarez	$\frac{7368}{1000} \frac{5.0}{100} \frac{80}{100} \frac{5.0}{100} \frac{80}{100} \frac{1}{100} \frac{1}{100} \frac{1}{100} \frac{1}{100} \frac{1}{100} \frac{1}{100} \frac{1}{1000} \frac{1}{1000} \frac{1}{1000} \frac{1}{10000} \frac{1}{10000} \frac{1}{10000} \frac{1}{10000} \frac{1}{10000} \frac{1}{10000} \frac{1}{10000} \frac{1}{100000} \frac{1}{1000000} \frac{1}{1000000} \frac{1}{10000000} \frac{1}{10000000} \frac{1}{100000000} \frac{1}{10000000000000000000000000000000000$
Remove			
2) Change Add	$\overline{\sqrt{Y}}$	Blas I TMBrode	7368.5.W.80 5T Ploza apt-14-168 Miami, F19, 33193
3) X Change Add Remove	5	Carlos A. Zoniga	736850, 8051. plaza apr. 4468 Migmu, FL, 32143
4) Change Add		Ingrid A. Calvo	$\frac{7368}{plaza} = \frac{200}{plaza} = \frac{1}{plaza}$
Кспюус			William, MI SSRES
5) Change Add			
Remove			
の Change Add			
Кспюче			
E. <u>If amending or addi</u>		ticles, enter change(s) here:	

(attach additional sheets, if necessary). (Be specific)

N/A

□ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

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Dated 10/20/2021
Signature
(By the chairman or vice chairman of the board, president or other officer-if directors
have not been selected, by an incorporator fiftin the hands of a receiver, trustee, or
other court appointed fiduciary by that fiduciary)
Ingrid Calvo
(Typed or printed name of person signing)
Treasurer
(Title of person signing)

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