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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

COMMUNITY LAN NAME OF CORPORATION:	NGUAGE ACCESS I	NC.	
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	mitted for filing.		
Please return all correspondence concerning this matte	er to the following:		
MARIA CAMILA PULIDO			
	(Name of Contact Po	erson)	
COMMUNITY LANGUAGE ACCESS INC.			
	(Firm/ Company	·)	-
121 SOUTH ORANGE AVE. SUITE 1500			
	(Address)		
ORLANDO, FL 32801			
	(City/ State and Zip	Code)	
CLA.ORG.USA@GMAIL.COM			
E-mail address: (to be used	for future annual rep	ort notification	1)
For further information concerning this matter, please	call:		
MARIA CAMILA PULIDO	at	407	409-4372
(Name of Contact Person	1)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	iyable to the Florida I	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	An Di	reet Address nendment Sect vision of Corpo flon Building	

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of



COMMUNITY LANGUAGE ACCESS INC.		2019 845	
(Name of Corporation as cur	rently filed with the Flo	rida Dept. of State) 2019 MAR - 8	PH
N18000013101			L 1
(Document No	umber of Corporation (if I	(nown)	SSEE
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this <i>Florida Not Fe</i>	or Profit Corporation adopts the following	
A. If amending name, enter the new name of the corpo	ration:		
N/A		The new	
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporate	d" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable:	N/A		
Principal office address MUST BE A STREET ADDRE	<u>(SS</u>)		
	-		
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 offinew registered agent and/or the new registered offi		, enter the name of the	
Name of New Registered Agent: N/A	<u> </u>		
New Registered Office Address:	(F	lorida street address)	
<u></u>		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I an		t the obligations of the position.	
	Signature of New Regis	tered Avent, 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 Doc 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>Mik</u>	n Doc te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	HON	Wilfredo Martinez	425 North Orange Ave
Add			Courtroom 6-B
X Remove			Orlando, FL 32801
2)Change	•		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
(mach thatth	ти опесы, у пессолагуу.	(be specifie)				
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		January 1st, 2019	
	date of each amer this document was	ndment(s) adoption: signed.	_, if other than the
E.C.	ective date <u>if appli</u>	N/A	
EIR	ective date <u>ir appir</u>	(no more than 90 days after amendment file date)	
Not doct	e: If the date insert ument's effective da	ed in this block does not meet the applicable statutory filing requirements, this date will not bate on the Department of State's records.	e listed as the
Ado	ption of Amendm	ent(s) (<u>CHECK ONE</u>)	
	The amendment(s was/were sufficient) was/were adopted by the members and the number of votes cast for the amendment(s) at for approval.	
	There are no mem adopted by the bo	bers or members entitled to vote on the amendment(s). The amendment(s) was/were ard of directors.	
	Dated	February 28th, 2019	
	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)	
		Maria Camila Pulido	
		(Typed or printed name of person signing)	
		President	
		(Title of person signing)	