

N190000001331

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

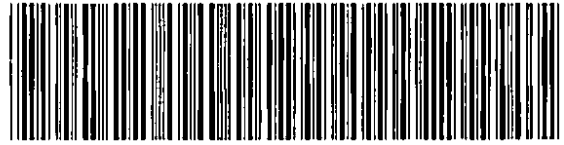
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Amend

11/01/20 10:00:00 ***35.00

2022 NOV -1 PM 2:54 2022 NOV -1 AM 10:36

FILED

A. RAMSEY
NOV 02 2022

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

FUNDANCIA MIAMI, INC

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ___ Cert. Copy _____
- ___ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____
- ___ Courier _____

Signature _____

Requested by: SETH _____

10/31/22 _____

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FUNDANICA MIAMI, INC

DOCUMENT NUMBER: N19000001331

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

Please return all correspondence concerning this matter to the following:

BENJAMIN L BREDAVA
(Name of Contact Person)

EPGD BUSINESS LAW
(Firm/ Company)

777 SW 37TH AVE, SUITE 510
(Address)

MIAMI, FLORIDA 33135
(City/ State and Zip Code)

Benjamin@epgdlaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Benjamin L. Bredava at 786 8376787
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

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

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

FILED

FUNDANICA MIAMI, INC

2022 NOV -1 AM 10: 36

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

N19000001331

(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:

_____ *The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

B. Enter new principal office address, if applicable: _____
*(Principal office address **MUST BE A STREET ADDRESS**)*

C. Enter new mailing address, if applicable: _____
*(Mailing address **MAY BE A POST OFFICE BOX**)*

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: _____

(Florida street address)

New Registered Office Address:

_____, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

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

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:

<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>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P, D</u>	<u>EGDA BARRIOS DE MARQUEZ</u>	<u>2 GROVE ISLE, APTO 909</u> <u>MIAMI, FLORIDA 33133</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>FARAH MARQUEZ</u>	<u>1 GROVE ISLE, APTO 509</u> <u>MIAMI, FLORIDA 33133</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S, D</u>	<u>CARLOS I AGUILAR</u>	<u>1 ALHAMBRA PLAZA SUITE 14</u> <u>CORAL GABLES, FL 33134</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>KRISTEN M LYNCH</u>	<u>200 S ANDREW AVENUE 9TH F</u> <u>FT LAUDERDALE, FL 33301</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>V</u>	<u>DANIELA MAROSO</u>	<u>721 BIRD ROAD, CORAL GABL</u> <u>MIAMI, FL 33146</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>ZAIS CORTES</u>	<u>10262 NW 74 TEERACE</u> <u>DORAL, FL 33178</u>

E. If amending or adding additional Articles, enter change(s) here:

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

Add Director - Irene Zingg - 60 EDGEWATER DR, APT 3H, CORAL GABLES 33133

Add Director - Sandra Gotera - AV. MILAGRO NORTE RESIDENCIAS BAYONA II EDIF 10 APTO PBC.

MARACAIBO, VENEZUELA

Remove - Director and Secretary - CARLOS I AGUILAR - 1 ALHAMBRA PLAZA SUITE 1410 CORAL GABLES.

FL 33134

Remove Director - KRISTEN M LYNCH - 00 S ANDREW AVENUE 9TH FLOOR, T LAUDERDALE, FL 33301

Add Secretary and Director - ZAIS CORTES - 10262 NW 74 TEERACE, DORAL, FL 33178

Add Vicepresident - DANIELA MAROSO - 721 BIRD ROAD, CORAL GABLES, MIAMI, FL 33146

Add President and Director - EGDA BARRIOS DE MARQUEZ - 2 GROVE ISLE, APTO 909, MIAMI, FLORIDA 33133

Add Treasurer - FARAH MARQUEZ - 1 GROVE ISLE, APTO 509, MIAMI, FLORIDA 33133

Remove Director - GLORIA DE BARRIOS 7266 SW 88TH ST, APTO 504 MIAMI, FL 33156

Multiple horizontal lines for additional entries.

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

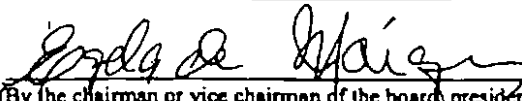
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 07-25-2022

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)

EDGA DE MARQUEZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)