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## **COVER LETTER**

TO: Amendment Section Division of Corporations

New Urt NAME OF CORPORATION:	oan Initiative Inc.		
N1900000296	50		
The enclosed Articles of Amendment and	fee are submitted for filing		
Please return all correspondence concernia	ng this matter to the followi	ng:	
Mario Abati			
<del>4 </del>	(Name of Cont	act Person)	
New Urban Initiative			
<u> </u>	(Firm/ Cor	npany)	
2071 NE 194th ter			
	(Addre	ss)	
North Miami Beach, FL 33179			
	(City/ State and	Zip Code)	
marioabati@nuintl.com			
E-mail address	: (to be used for future annu	al report notification	n)
For further information concerning this m	atter, please call:		
Mario Abati		305 at	788-0140
(Name of Cor	ntact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amo	unt made payable to the Fk	orida Department of	State:
<del>-</del>	ing Fee & \$\Bigsiz\$\$ \$\Bigsiz\$\$ \$\Bigsiz\$\$ \$Certified Cop (Additional cenclosed)	oy Certif copy is Certif	0 Filing Fee ficate of Status fied Copy ficated Copy ficated Copy is fixed)
Mailing Address Amendment Section		Street Address Amendment Sect	ion

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation

ew Urban Initiative Inc.	OI	Ĺ	15, 1110:21
	d. D		
ame of Corporation as currently filed with the Flori	ida Dept. of State)		
(Document N	umber of Corporation	n (if known)	
rsuant to the provisions of section 617.1006, Florida St endment(s) to its Articles of Incorporation:	atutes, this <i>Florida N</i>	Not For Profit Co	rporation adopts the following
If amending name, enter the new name of the corporate	oration:		
			The net
me must be distinguishable and contain the word "corp company" or "Co." may not be used in the name.	poration" or "incorp	orated" or the ab	breviation "Corp." or "Inc."
Enter new principal office address, if applicable:			
rincipal office address <u>MUST BE A STREET ADDRI</u>	<u>ESS</u> )		
		<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
If amending the registered agent and/or registered		orida, enter the	name of the
new registered agent and/or the new registered off	ice address:		
Name of New Registered Agent:			
Now Registered Office Address:		(Florida street ac	ldress)
new negative office marcis.			
	(City)		, Florida
	(6.19)		(zip code)
w Registered Agent's Signature, if changing Registe			
New Registered Office Address:			Florida (Zip Code)

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:  X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change Add	<u>P</u>	Mario Abati	2071 NE 194th Ter North Miami Beach, FL 33179
Remove			
2) Change Add			
Remove 3 ) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
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	07/15/2020	
The date of each amendment(s) adoption: date this document was signed.		_, if other than the
Effective date if applicable:		
	no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Departmen	not meet the applicable statutory filing requirements, this date will not t of State's records.	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	
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)	
Mario Abati	
(Typed or printed name of person signing)	
President	

(Title of person signing)