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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	ARTURO REYES	JR. TEEN SUPPO	RT CORPOR	ATION	
DOCUMENT NUMBER:	N19000004745			<u>-</u>	
The enclosed Articles of An		mitted for filing.			
Please return all corresponde	ence concerning this matte	er to the following:			
Clarissa Reyes					
<del>- · ·</del>		(Name of Contact P	erson)		
Non-Profit Organization					
		(Firm/ Compan	y)		<u>-</u> .
6808 Canton Street					
		(Address)			·
Fort Myers, FL 33966					
		(City/ State and Zip	Code)		**
clarissareyes2016@gmai	l.com				
-	-mail address: (to be used	for future annual rep	oort notification	1)	
For further information conc	eming this matter, please	call:			
Clarissa Reyes		at	(239)	4647476	
	(Name of Contact Person		(Area Code)	(Daytime Teleph	one Number)
Enclosed is a check for the f	ollowing amount made pa	yable to the Florida l	Department of	State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	0 Filing Fee feate of Status fied Copy tional Copy is	2019 JUH 2 2 TAL

**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

Enclosed)

## Articles of Amendment to Articles of Incorporation of

Arturo Reyes Jr. Teen Support Corporation

(Name of Corporation a	s currently filed with the	Florida Dept. of State)
N19000004745	nt Number of Corporation	(if known)
Pursuant to the provisions of section 617.1006, Floric amendment(s) to its Articles of Incorporation:	·	
A. If amending name, enter the new name of the c	orporation:	
N/A		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	'corporation" or "incorpo	
B. Enter new principal office address, if applicable	N/A	
(Principal office address <u>MUST BE A STREET AD</u>		
	<del>.</del>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>N/A</u>	
D. If amending the registered agent and/or registened new registered agent and/or the new registered		rida, enter the name of the
	I/A	
Name of New Registered Agent:		.,
New Registered Office Address:		(Florida street address)
1	I/A	. Florida
_	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reliable I hereby accept the appointment as registered agent.		ecept the obligations of the position.
_	Signature of New I	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	PT	John Doe	
X Remove	<u>V</u> <u>SV</u>	Mike Jones	
X Add	<u> 2 v</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
(Check One)			
1) Change	VP	Yesenia Garica	4603 Morgan La Fee LN
Add			Fort Myers ,FL 33912
X Remove			
2) Change	VP	Delia Burgos Carmona	3846 Edgewood Avenue
Add			Fort Myers, FL 33916
X Remove			
3) Change	PTD	Clarissa Reyes	6808 Canton Street
X Add			Fort Myers, FL 33966
Remove			
4) X Change	VP	Marisa Zavala Martinez	6808 Canton Street
Add			Fort Myers, FL 33966
Remove			<del></del>
5) Change			
Add			
Remove			
6) Change			
Add	<del></del>		
Remove			
		Page 2 of 4	

E. If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)		
N/A			
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	04/29/2019	10 4 4 4
	e date of each amendment(s) adoption:  e this document was signed.	if other than the
	05/02/2019	
Effe	ective date <u>if applicable</u> :  (no more than 90 days after amendment file date)	
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be cument's effective date on the Department of State's records.	listed as the
Ade	option 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 O6/20/2019 Signature Court Court	
	(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)	
	Marisa Zavala Martinez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	•