

N19 000009377

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

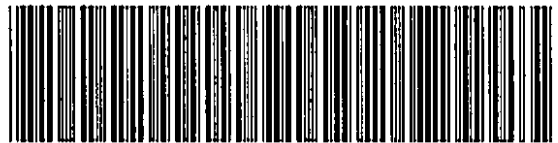
(Business Entity Name)

(Document Number)

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: NACION DE FE TAMPA MAIN CORP

DOCUMENT NUMBER: N19000009377

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

Please return all correspondence concerning this matter to the following:

WILLY E. PONCE

(Name of Contact Person)

NACION DE FE TAMPA MAIN CORP

(Firm/ Company)

510 LAGUNA MILL DR.

(Address)

RUSKIN, FLORIDA 33570

(City/ State and Zip Code)

willyponce77@icloud.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WILLY E. PONCE

813

368-9345

at

(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 type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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

NACION DE FE TAMPA MAIN CORP

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

N19000009377

(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:

NOT APPLICABLE

*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:

2202 SOUTH 50TH STREET TAMPA, FLORIDA 33619

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

510 LAGUNA MILL DR. RUSKIN, FLORIDA 33570

(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:

WILLY E. PONCE

510 LAGUNA MILL DR.

(Florida street address)

New Registered Office Address:

RUSKIN

(City)

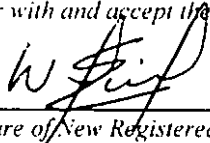
Florida

33570

(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 type="checkbox"/> Add	<u>P</u>	<u>RAFAEL M. FUENTES</u>	<u>3874 MOUNT VERNON WAY</u> <u>KISSIMMEE, FLORIDA 34741</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>VP</u>	<u>MARILYN VILLALONA</u>	<u>3874 MOUNT VERNON WAY</u> <u>KISSIMMEE, FLORIDA 34741</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>WILLY E. PONCE</u>	<u>510 LAGUNA MILL DR.</u> <u>RUSKIN, FLORIDA 33570</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>VP</u>	<u>ENIS Y. SANTIAGO RAMOS</u>	<u>510 LAGUNA MILL DR.</u> <u>RUSKIN, FLORIDA 33570</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>KAREN MARIA BILL ROMERO</u>	<u>5927 NORTH ROMA AVE.</u> <u>APT. 5</u> <u>TAMPA, FLORIDA 33604</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

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


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

NOT APPLICABLE

■ 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 NOVEMBER 16, 2020

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)

RAFAEL M. FUENTES  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)

# NEHAUL PLAZA

## LEASE SUMMARY SHEET

November 16<sup>th</sup>, 2020

**Tenant Information:**

Nacion de Fe Tampa Corp.  
Willy Ponce  
510 Laguna Mill Drive  
Ruskin, FL 33570  
email: willyponce77@icloud.com  
cell: (813) 368-9345

**Landlord Information:**

K&R, LLC  
Cecil & Nadira Nehaul  
Nadira cell phone: (813) 843-7847  
email: dira38@aol.com

**mail rent checks payable to:**

K&R, LLC  
2106 Isle of Palms Drive  
Valrico, FL 33596

**Leased Space:** 2022 South 50<sup>th</sup> Street, Tampa, FL 33619

**Lease Commencement Date:** November 23<sup>rd</sup>, 2020

**Rent Commencement Date:** December 1<sup>st</sup>, 2020

**Square Footage:** 1,569 SF

**Monthly Rent (Initial Term):** \$14.00 PSF

MONTHS	BASE RENT	WATER BILL	SALES TAX.	TOTAL MO. RENT
11/23/2020 – 11/30/20	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
12/01/2020 – 02/28/21	\$1,583.00	\$ 50.00	\$ 0.00	\$1,633.00
03/01/2021 – 05/31/21	\$1,783.00	\$ 50.00	\$ 0.00	\$1,833.00
06/01/2021 – 11/30/21	\$1,830.50	\$ 50.00	\$ 0.00	\$1,880.50
03/01/2021 – 05/31/21	\$1,885.42	\$ 50.00	\$ 0.00	\$1,935.42

**At lease signing, amount due:**

Security Deposit	\$2,000.00	
First months advance rent:	<u>\$1,633.00</u>	(December 01-31, 2020)
<b>Total funds due</b>	<b>\$3,633.00</b>	

Please be aware that you will not receive a monthly bill. Rent is due on the first of each month and past due on the sixth. Please make checks payable to:

**NEXT RENT PAYMENT WILL DUE JANUARY 1<sup>st</sup>, 2021**

**For Questions concerning Property Management, contact:**

Landlord, Cecil or Nadira Nehaul  
- information above