1/15/2020

Division of Corporations

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January 16, 2020

FLORIDA DEPARTMENT OF STATE

EXPRESS CORPORATE FILING SERVICE Division of Corporations

SUBJECT: CORAVEN ORGANIZATION, INC.

REF: N19000010309

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If you have any further questions concerning your document, please call (850) 245-6050.

Terri J Schroeder Regulatory Specialist III Letter Number: 820A00001230 Amendment Section

FAX Aud. #:

Articles of Amendment to Articles of Incorporation of

CORAVEN ORGAN	NIZATION, INC),		
Name of Corporation as currently filed with the Florida	Dept. of State)			
N1900001	0309			
(Document Numb	er of Corporation	(if known)		
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Iscorporation:	es, this <i>Florida No</i>	t For Profit Corporatio	n adopts the following	
A. If amending name, enter the new name of the corpora	tion:	į	The new	
name must be distinguishable and contain the word "corpore	ition" or "incarpo	rated" or the abbreviati		
"Company" or "Co." may not be used in the name.				3
B. Enter new principal office address, if applicable:			SS	3
(Principal office address MUST BE A STREET ADDRESS)		원원 <u>(</u>	<u>-</u>
•			<u> </u>	Z
			17. mg	116 210:01
				_
C. Enter new mailing address, if applicable:			V. C.	宝
(Mailing address MAY BE A POST OFFICE BOX)	·			Ö
			五三	0
				_
		—		
D. If amending the registered agent and/or registered off	ice address in Flo	rida, enter the name of	the	
new registered agent and/or the new registered office	address:			
Name of New Registered Agent:				
	<u></u>	(Florida greet address)		
New Registered Office Address:				
		T7	±: 4	
	(City)	, F10	rida Zip Codej	
	14-77	(-		
New Registered Agent's Signature, if changing Registered I heraby accept the appointment as registered agent. I am for	1 Agent: amiliar with and ac	cept the obligations of t	he position.	
	-11			
?,	lignature of New R	egistered Agent, if chan	ging	

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 afficer/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 I V Mike SV Sally	Jones	<i>Ω</i> . ໄ	,
Type of Action (Check One)	Title	<u>Name</u>	Address TALL AND WAY STATE OF THE STATE OF T	S IAK
1) X Change Add	<u>P</u>	PAULINE GONZALEZ FINOL	9334 WEST 33RD WAY HIALEAH, FL 33018 U)	16 AM 10: 01
Remove 2) X Change Add	V	EUGENIA FERNANDEZ	1723 SW 2ND AVENUE 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	0:07
Remove Change Add Remove	ST	GLENYS GARCIA	820 SW 147TH AVENUE PEMBROKE PINES, FL 33327	
4) Change Add				
Remove 5) Change Add				
Remove 6) Change Add				
Remove E. If amending or additional sh	ling additional A	Page 2 of 4 rticles, enter change(s) here:		
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Page 3 of 4		
The date of each amendment(s) adoption: 01/01/2020 , if other date this document was signed.	r than the	
Effective date if applicable:		
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 filling requirements, this date will not be listed document's effective date on the Department of State's records.	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.		

Dated

Of Of Of Of Order constant 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)

PAULINE GONZALEZ FINOL

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

2020 JAN 16 AM 10: 07 SECRETARY OF STATE