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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

Honduras Rising USA, Inc  
**NAME OF CORPORATION:** \_\_\_\_\_

N20000004657  
**DOCUMENT NUMBER:** \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Liliana Patricia Sanchez Tapia

\_\_\_\_\_  
(Name of Contact Person)

Honduras Rising USA, Inc.

\_\_\_\_\_  
(Firm/ Company)

3394 W 106th Terrace

\_\_\_\_\_  
(Address)

Hialeah, FL 33018

\_\_\_\_\_  
(City/ State and Zip Code)

hondurasrisingusa@gmail.com

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

For further information concerning this matter, please call:

Liliana Patricia Sanchez Tapia

954

6550178

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 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

TO: **Amendment Section**  
**Division of Corporation**

Name of Corporation: **Honduras Rising USA, Inc.**  
Document Number: N20000004657

RECEIVED  
2022 JUL -8 PM 12:21  
STATE OF FL

The enclosed Articles of Amendment and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:  
Name of Contact person: Liliana P. Sanchez Tapia  
Firm / Company: Honduras Rising USA, Inc.  
Address: 3394 W 106<sup>th</sup> Terraces, Hialeah, FL 33018  
Email address: Hondurasrisingusa@gmail.com

For further information concerning this matter, please call:  
Name of Contact Person: Liliana P. Sanchez Tapia at 954 655 0178  
Enclosed is a check for \$43.75 made payable to the **Florida Department of State** for Filing Fee & Certificate of Status.

Mailing Address:  
Amendment Section  
Division of Corporation  
P.O. Box 6327  
Tallahassee, FL 32314

**Articles of Amendment to Articles of Incorporation of Honduras Rising USA, Inc., document Number of Incorporation N20000004657, formed on April 30, 2020**

Pursuant to the provision of section 607.1006, Florida Statutes, this corporation adopts the following amendments to its Articles of Incorporation.

**Amendment to Article III:**

Article III. The association is organized exclusively for charitable, religious, educational, and scientific purposes, including for such the making of distributions to organizations that qualify as exempt organizations described under Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code. The association has the objective of contributing with material and moral aid to Honduras associations and institutions and eventually develop cultural, social, and economic exchanges between Honduras and The United States.

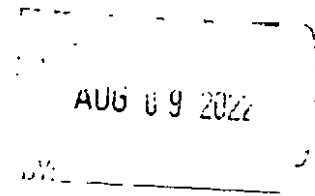
**Add Article IX:**

Article IX. Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

Dated, Jun 27, 2022

Signature of a member, Treasure  
Typed or printed name of the signee: Liliana P. Sanchez Tapia (Treasure)

August 4, 2022



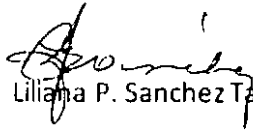
TO: **Amendment Section**  
**Division of Corporation**

Name of Corporation: **Honduras Rising USA, Inc.**  
Document Number: N20000004657

We sent the request Amendment to Article to Honduras Rising USA on July 5<sup>th</sup>, 2022, but we forgot to include the check. Please find enclosed check No. 103 for \$43.75 payable to the **Florida Department of State** for Filing Fee & Certificate of Status.

Please let us know if you have any questions.

Thanks in advance,

  
Liliana P. Sanchez Tapia

Cell 954 655 0178

Email address: Hondurasrisingusa@gmail.com

Email address: lilianademeza@hotmail.com



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 11, 2022

LILIANA P SANCHEZ  
HONDURAS RISING USA INC  
3394 W 106TH TERRACE  
HIALEAH, FL 33018

SUBJECT: HONDURAS RISING USA, INC.  
Ref. Number: N20000004657

We have received your document for HONDURAS RISING USA, INC. and your check(s) totaling \$43.75. However, the document has not been filed and is being retained in this office for the following:

Please complete the attached amendment form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Diane Cushing  
Senior Section Administrator

Letter Number: 322A00022767

Articles of Amendment  
to  
Articles of Incorporation  
of

Honduras Rising USA, Inc.

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

N20000004657

(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:

N/A

*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**)

N/A

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

N/A

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:

N/A

New Registered Office Address:

(Florida street address)

N/A

(City)

Florida N/A

(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.*

N/A

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  <input type="checkbox"/> Remove	_____	<u>N/A</u>	_____ _____ _____
2) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	<u>N/A</u>	_____ _____ _____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	<u>N/A</u>	_____ _____ _____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	<u>N/A</u>	_____ _____ _____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	<u>N/A</u>	_____ _____ _____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	<u>N/A</u>	_____ _____ _____

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

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

The amendment is submitted to amend Article III and add Article IX as following: \_\_\_\_\_

Article III \_\_\_\_\_

The organization is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations described under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code. \_\_\_\_\_

The association has the objective of contributing with material and moral aid to Honduran associations and intitutions and eventually develop cultural, social, and economic exchanges between Honduras and The United States.

#### Article IX

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

The date of each amendment(s) adoption: June 27, 2022, 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.

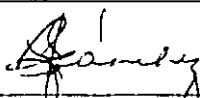
Adoption of Amendment(s) **(CHECK ONE)**

- ☐ 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 October 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)

Liliana Patricia Sanchez Tapia

(Typed or printed name of person signing)

Treasurer

(Title of person signing)