

N200000011417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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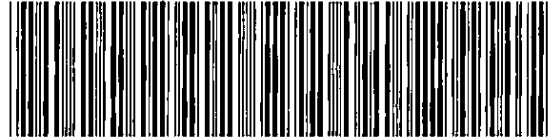
(Business Entity Name)

(Document Number)

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R. HUNT

09/14/23

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Human Touch community Resources, inc

DOCUMENT NUMBER: N 2 00000 11417

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

Please return all correspondence concerning this matter to the following:

Linabell LOPEZ

(Name of Contact Person)

N/A

(Firm/ Company)

2169 NE 7th St

(Address)

Homestead FL 33033

(City/ State and Zip Code)

linabelllopez@gmail.com

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

For further information concerning this matter, please call:

Linabell LOPEZ

(Name of Contact Person)

at 786-763-7320

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

2023 SEP 14 PM 12:40

CLERK OF COURT
DIVISION OF CORPORATIONS

Articles of Amendment
to
Articles of Incorporation
of

Human Touch Community Resources, INC
(Name of Corporation as currently filed with the Florida Dept. of State)

N 2 000 0011417
(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:

Casita Villa Azteca, INC. 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)

123 N. Krome Ave #104
Homestead, FL 33030

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

2169 NE 7th St
Homestead, FL 33033

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: _____

New Registered Office Address:

(Florida street address)

(City)

Florida

(Zip Code)

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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	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action
(Check One)

Title

Name

Address

- | | | | |
|--|---------|-------------------|---|
| 1) <input checked="" type="checkbox"/> Change
<input type="checkbox"/> Add | VT | Jose Lopez | 2169 NE 7th St
Homestead FL 33033 US |
| <input checked="" type="checkbox"/> Remove | T | Dionisio Cuachado | 800 NE 12th Ave #623
Homestead, FL 33030, US |
| 2) <input type="checkbox"/> Change
<input checked="" type="checkbox"/> Add | | | |
| <input type="checkbox"/> Remove
3) <input checked="" type="checkbox"/> Change
<input checked="" type="checkbox"/> Add
<input type="checkbox"/> Remove | Asst. T | Jennifer Perez | 997 E. 179th St #1M
Bronx, NY 10460 US |
| 4) <input checked="" type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | PCFO | Linabell Lopez | 2169 NE 7th St
Homestead, FL 33033 |
| 5) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | | | |
| 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)

Article I: The name of the corporation is: Carita Villa
Azteca, Inc.

Article II: The principal place of business address:
123 N. Krome Ave suite 104, Homestead FL 33030

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CLERK OF DISTRICT COURT
CLERK OF DISTRICT COURT

Article III: The specific purpose for which this Corporation is organized is to provide charitable, educational programs, social services assistance non-legal immigration help and education to low income and indigent clients of Miami Dade County and to ensure that all children and youth have access to affordable quality day care, after school and summer camp programs.

Article VII:

Title: CEO

Limbell Lopez: 2169 NE 7th St, Homestead, FL 33033

Title: VPT

Jose B. Lopez: 2169 NE 7th St, Homestead, FL 33033

Title: S

Andrea Vazquez: 100 NE 6th Ave #711, Homestead, FL 33033

Title: Asst T.

Jennifer Perez: 997 E 179th St, #1M, Bronx, NY 10460

The date of each amendment(s) adoption: _____, 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.

2023 SEP 14 PM 12:49
DIVISION OF
STATE RECORDS

☐ 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

9/6/2023

Signature

Anatell Lopez

(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)

Limbeil Lopez

(Typed or printed name of person signing)

President/CEO

(Title of person signing)

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OFFICE OF THE CLERK
COURT OF COMMON PLEAS
JULIA A. GRIFFIN, CLERK