NA1000006325

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION	:FUNDACIO	N CINEXILIO INC.		
DOCUMENT NUMBER:	N21000006325	i .		
The enclosed Articles of Amend	dment and fee are sub	mitted for filing.		
Please return all correspondence	e concerning this matt	er to the following:		
		Sonia Becerra		
		(Name of Contact Perso	on)	
		Swyft Filings		
		(Firm/ Company)		
		3 Greenway Plaza #1326)	L 538
		(Address)		27
		Houston, TX 77046		·- (
		(City/ State and Zip Coo	le)	*. !
				-13- Μ,,
		info@amaxtaxpro.com		<u> </u>
E-ma	ail address: (to be used	I for future annual report	notification)	, 11
For further information concern	ing this matter, please	call:		
	Sonia Becerra	at	877-777-0450	
(Na	ame of Contact Person) (A	rea Code) (Daytime Telephor	ne Number)
Enclosed is a check for the follo	owing amount made p	ayable to the Florida Dep	partment of State:	
■ \$35 Filing Fee □	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
<u>Mailing Add</u> Amendment S			Address dment Section	
Division of C		Division of Corporations		
P.O. Box 632	7	The C	Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

ame of Corporation as currently filed with the Florida Dept. of State)	
N21000006325	
(Document Number of Corporation (if known)	
ursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation additional to its Articles of Incorporation:	opts the following
If amending name, enter the new name of the corporation:	
une must be distinguishable and annual to	The new
ne must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Company" or "Co." may not be used in the name.	Corp." or "Inc."
Enter new principal office address, if applicable: ncipal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	- in
Mailing address MAY BE A POST OFFICE BOX)	AG
	25
If amending the registered agent and/or registered office address in Florida, enter the name of the	<u> </u>
new registered agent and/or the new registered office address:	: '() 기본
Name of New Registered Agent:	31.
New Registered Office Address: (Florida street address)	
The same of the sa	
(City) , Florida, Florida, Florida, Florida, Florida	

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 = ChiefExecutive 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 X_Remove X_Add	<u> </u>	lohn <u>Doe</u> Mike <u>Jones</u> Sally S <u>mith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	DIR	GILBERTO B. REYES	3030 NW 5TH ST (2)
2) Change Add	SEC	CAMILO VILAPLANA	7841 SW 29TH ST, MIAMI, FL 33155
Remove Change Add Remove	DIR	YOSLEIDYS RODRIGUEZ GONZALEZ	1900 Travis Rd Lake Clarke Shores, FL 33046
4) Change Add			
Remove			
5) Change Add			
Remove 6) Change Add			
Remove			
E. If amending or addin (attach additional shee	ig additional	Articles, enter change(s) here: ry). (Be specific)	
Article III : The spe	ecific purp	ose for which this corporation is organiz	zed is:
		eligious or other purposes as restricted	
On dissolution, the	Board sha	Ill distribute assets to one or more char	itable purposes to a = EU =
exempt under Sect	501(c)(3)	. Any project about culture, theater, c	nema education
			morna, education.

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.

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Example: X Change X Remove X Add	<u>∨</u> <u>Mil</u>	<u>n Doe</u> ke Jones ly Smith		
Type of Action (Check One)	Title	<u>Name</u>	Address	
1) Change Add				
Remove			-	
2) Change Add				2023 NAY
Remove 3) Remove 4 Add 8 Remove				23
4) Change Add				
Remove				m
5) Change Add				
Remove				
6) Change Add				
Remove				
E. If amending or add (attach additional sh	ling additional A eets, if necessary)	rticles, enter change(s) here: . (Be specific)		
				

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 me adopted by the t	mbers or members entitled to vote on the amendment(s). The amendment(s) was/were soard of directors.
	Dated	05/17/2023
	Signatur	
	Signatu	(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)
		OLEIDO RAFAEL VILAPLANA
		(Typed or printed name of person signing)
		President
		(Title of person signing)

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