N23000007229

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	огр 			
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are st				
Please return all correspondence concerning this ma	atter to the following:			
Vladimir Santos				
	(Name of Contact	Person)		
Mia Esperanza Corp				
	(Firm/ Compa	ny)		
2273 SW 61st Avenue				
	(Address)			
Miami, Florida 33155				
· · · · · · · · · · · · · · · · · · ·	(City/ State and Zi	p Code)	1	
MIAESPERANZACORP@gmail.com				
E-mail address: (to be us	sed for future annual r	eport ne	olificatio	n)
For further information concerning this matter, plea	ase call:			
Brenda Benitez	,	305 at		924-7230
(Name of Contact Person		(Area	a Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	payable to the Florida	a Depar	tment of	State:
S35 Filing Fee	——————————————————————————————————————		Certif Certif	icate of Status icd Copy tional Copy is
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	<i>د.</i> ۱	Division	ient Sect of Corpo	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Mia Esperanza Corp		
(Name of Corporation as currently filed with the	Florida Dept. of State)	
N23000007229		
(Docum	ient Number of Corporation (if kr	nown)
Pursuant to the provisions of section 617.1006, Flor amendment(s) to its Articles of Incorporation:	rida Statutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
N/A		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	•	
B. Enter new principal office address, if applical	ble:	
(Principal office address MUST BE A STREET A.		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	B <i>OX</i>) N/A	
		23
		<u> </u>
D. If amending the registered agent and/or regis		enter the name of the
new registered agent and/or the new registere		
Name of New Registered Agent:	N/A	= = = = = = = = = = = = = = = = = = =
		6: 00
	Œle	orida street address)
<u>New Registered Office Address:</u>		
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing R	egistered Agent:	
I hereby accept the appointment as registered agent	. Lam familiar with and accept	the obligations of the position.
_	Signature of New Registe	ered 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: X Change X Remove X Add	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add		N/A	
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee)		nal Articles, enter change(s) here: ssary). (Be specific)	
(Adding) Dissolution Cla	iuse:		
Upon the dissolution of th	is organi:	zation, assets shall be distributed for one or mor	e 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 g	governme	nt, or to a state or local government, for a public	purpose.

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				•	<u> </u>	
The date of each amendment date this document was signed					 	, if other than th
Effective date if applicable:	06/19 2023					
Effective date <u>if applicable</u> .	(no	more than 9	0 days after ame	ndment file dat	e)	
Note: If the date inserted in the document's effective date on t	nis block does n he Department	ot meet the a of State's rec	pplicable statuto ords.	ry filing require	ements, this date wi	Il not be listed as the
Adoption of Amendment(s)	(<u>C</u>	HECK ON	<u>E</u>)			
☐ The amendment(s) was/w was/were sufficient for ap	vere adopted by pproval.	the members	s and the number	of votes east fo	or the amendment(s)

. .

Dated	06/19/2023	
Signature		
, c	(By the chairma have not been s	n or vice chairman of the board, president or other officer-if directors celected, by an incorporator — if in the hands of a receiver, trustee, or ointed fiduciary by that fiduciary)
	Vladimir Sa	ntos
	+++++	(Typed or printed name of person signing)
	President	