

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230002158103)))



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**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:	Division of C	orporations		2023 J
	Fax Number	: (850)617-6380		
rom:				Star S
	Account Name	: SILVAS FINANCIAL S	ERVICES, L.L.C.	· · · · · ·
	Account Number	∽ : I20020000100		29. <b>Ť</b>
	Phone	: (305)944-9755		····
	Fax Number	: (888)401-1914		<u> </u>
				<b>· · ·</b>

Email Address:\_\_\_\_

COR AMND/RESTATE/CORRECT OR O/D RESIGN MANOS DE SAN VICENTE INC Certificate of Status 0 Certificate of Status 0 Certificate of Status 0 Page Count 01 Estimated Charge 535.00 A. RAMSEY

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Help

Page: 3 of 7	2023-06-15 1	9:07:56 GMT	18884011914	From: Silvas Finançial Services, L
((1123000215810 3)))			4	
		COVER LETTER	, <b>•</b>	.:
TO: Amendment Section Division of Corporations				
NAME OF CORPORATION	MANOS DE SAN Y	VICENTE INC		
N DOCUMENT NUMBER:	23000007237			
The enclosed Articles of Amer	<i>idment</i> and fee are sub	mitted for filing.		
Please return all correspondent	ce concerning this matt	ter to the following:		
JUAN CARLOS GATTI				
		(Name of Contact Perso	n)	
MANOS DE SAN VICENTE	INC			
		(Firm/ Company)		
715 JUNIPER LN				
		(Address)		
WESTON, FL 33327				
		(City/ State and Zip Coc	le)	
ACCOUNTING2@SILVASE	OX.COM			
E-n	nail address: (to be use	d for future annual report	notification)	
For further information concer	ning this matter, please	e call:		
		at		
()	ame of Contact Persor		rea Code) (Daytime Telepho	one Number)
Enclosed is a check for the foll	lowing amount made p	ayable to the Florida Dep	artment of State:	
□ \$35 Filing Fee □	3\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
<u>Mailing Ade</u> Amendment Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Amen Divisi The C 2415	<u>Address</u> dment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	)

To:

Page: 4 of 7	2023-06-15 19:07:56 GMT	188840	11914	From: Silvas Financial Services, L
((1123000215810 3)))			11 C	n
	Articles	of Amendment	FILE	U
	-	to		
	Articles	fIncorporation of	2023 JUN 15 P	M 1:08
	MANOS DE S	SAN VICENTE INC	SEPTETARY OF	ISTATE
Name of Corporation as curren	tly filed with the Florida Der	ot, of State)	たい うちょううけい	▶   sriş 
N23000007237				
	(Document Number	of Corporation (if know	/n)	
Pursuant to the provisions of section amendment(s) to its Articles of Inc A. If amending name, enter the	corporation:		rofit Corpor <b>a</b> tion adop	ts the following
FUNDACION HUELLAS VICE	STINA INC			The new
name must be distinguishable and "Company" or "Co." may not be	contain the word "corporation used in the nume.	n" or "incorporated" o	r the abbreviation "Co	
B. <u>Enter new principal office ad</u> (Principal office address <u>MUST E</u>	dress, if applicable:	\$/A		<u></u>
	-			
C. <u>Enter new mailing address.</u> (Mailing address <u>MAYBEA</u>	if applicable: POST OFFICE BOX	\$/A		
	-			
D. If amending the registered ag new registered agent and/or	ent and/or registered office and the new registered office add	address in Florida, en ress:	ter the name of the	
<u>Name of New Re</u>	gistered Agem:	<u>.</u>		
<u>New Registeree</u>	Office Address:	(Florid	a street address)	
			, Florida	
		(City)	(Zip Coa	le)
New Registered Agent's Signatu	re if changing Degistered 4.	ant.		
Thereby accept the appointment as	eradistarad agant - Landonil	harwith and accent the	obligations of the nasi	tion.

To:

Signature of New Registered Agent, if changing

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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 officeheld. 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>John D</u> ⊻ <u>Mike J</u> <u>SV</u> <u>Sally S</u>	ones	
<u>Type of Action</u> (Check One)	Title	Name	<u>Addres</u> s
I) Change Add			
Remove			
2) Change Add			
3) Remove 3) Change Add			
4) Remove 4) Change Add			
Remove			
5/ Change Add		<u></u>	
Remove			
6) Change Add			
Remove			

F. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) (((H23000215810 3)))

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				<u></u>	
<u> </u>	. 8.0			• <b></b>	
	04/05/2022				
The date of each amendment(s) adopt date this document was signed.	ion:			, if other than	the
Effective date if applicable:	(no more than 90 da				
	(no more than 90 da	iys after amendment fil	le date)		
Note: If the date inserted in this block of document's effective date on the Depart			equirements, this dat	te will not be listed as the	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )				

The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.

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Dated

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

06/15/2023

Juan Carlos Gatti 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)

JUAN CARLOS GATTI

(Typed or printed name of person signing)

JUAN CARLOS GATTI-PRESIDENT

(Title of person signing)

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