

N/230000

15166

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

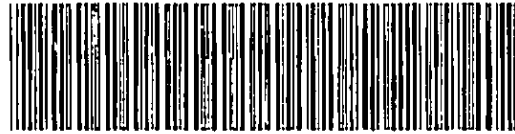
Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer

The following articles were  
updated on 06/23/24 due  
to missing-Rge.  
J. Dennis

Office Use Only



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04/11/24--01002--012 ♦♦70.00

*Handwritten signature*

RECEIVED  
2024 APR 11 PM 12:03  
SECRETARY  
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: SAINT CLOUD COMMUNITY MISSION INC.

DOCUMENT NUMBER: N23000015166

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

Please return all correspondence concerning this matter to the following:

PEDRO INFANTE

(Name of Contact Person)

(Firm/ Company)

1633 E VINE ST

(Address)

KISSIMMEE FL 34744

(City/ State and Zip Code)

StCloudMission@gmail.com

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

For further information concerning this matter, please call:

(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 checked="" 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

Articles of Amendment  
to  
Articles of Incorporation  
of

SAINT CLOUD COMMUNITY MISSION INC.

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

N23000015166

(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:

*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)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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)

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	<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	_____	_____	_____ _____ _____
2) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add  <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
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	_____	_____	_____ _____ _____

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

PLEASE SEE ATTACHMENT

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- ☐ 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 04/09/2024

Signature Pedro Infante  
(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)

PEDRO INFANTE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

TO: FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

STATE OF FLORIDA  
COUNTY OF DUVAL

In Re: )  
SAINT CLOUD COMMUNITY MISSION, INC. ) Florida Not For Profit Corporation  
1633 E Vine Street, Suite 217, in Kissimmee ) Doc. No. N23000015166  
Kissimmee, Florida 34744 )

**NOTARIZED AFFIDAVIT OF PEDRO INFANTE**

**STATEMENT OF FACT**

On behalf of Saint Cloud Community Mission, Inc., a Florida Not-for-Profit corporation, the undersigned hereby certifies this statement on the following facts:

1. I, Pedro Infante, am a founding director of Saint Cloud Community Mission, Inc., a Florida nonprofit corporation. Our office is located at 1633 E Vine Street, Suite 217, in Kissimmee.
2. This statement serves as a supplement to change of the Registered Agent, and with reference to the Amendment to the Articles of Incorporation establishing the corporation's **effective date December 14, 2023**. However, we are currently unable to file an Annual Report electronically within the SunBiz portal.
3. The Florida State Statute for Incorporation, § 617.0203 (1), allows for specifying an effective date 5 business days prior to the date of filing. Section 617.1001 affirms the corporation's Authority to amend the articles of incorporation. The amendment of the articles were executed consistent with the procedures at § 617.1002, and in compliance with all relevant provisions under Chapter 617 of the Florida Statute.
4. On February 23, 2024 the Amendment was added by the Florida Department of State, Division of Corporations to the record as a matter of public notice.
5. The Amendment details the original filing for the nonprofit incorporation was made on December 19, 2023 through a third-party company supporting the nonprofit's registration in Florida. The service company, however, did not adhere to the intent and purpose of the Affidavit signed November 30<sup>th</sup>, 2023 by the founding directors of Saint Cloud Community Mission, Inc., which was to expressly document the nonprofit's incorporation as of November 30, 2023. A true and correct copy of the Notarized Affidavit is attached to this filing for verification.
6. Due to various factors, the service company charged with filing the original documents did not complete original registration until December 19, 2023. In further failure to communicate in a timely manner, the company took upon itself to enter 1/1/2024 as the organization's effective date, rather than adhering to intent of the Notarized Affidavit signed November 30, 2023, or the earliest predated filing permitted by Florida Statute at § 617.0203 (1).

7. The filing error, although initially due to miscommunication and erroneous assumptions, is now regarded as potential misrepresentation in a complaint filed with a federal agency. If left uncorrected, the original filing may also subject the nonprofit corporation to additional exposure for activities conducted between November 2023 through the end of the year.

8. Upon learning of the scrivener's errors on December 19, 2023, the directors of Saint Cloud Community Mission, Inc. took immediate action and authorized filing of the Amendment. The original Registered Agent has since been replaced. Counsel was subsequently sought and engaged to review the Florida Corporation Statutes, advise on the organization's corporate compliance, and represent the nonprofit in its proceedings.

9. More than 30 days have since elapsed since the filing of the Amendment became a matter of public notice. There has been no state-level challenge in Florida against the corporate standing of Saint Cloud Community Mission, Inc. at any time relevant. No court action has been taken against it by the Florida Office of Attorney General, Department of Legal Affairs.

10. With the effective date relisted as per § 617.0203(1) by the Amendment, the nonprofit corporation must proceed with routine filings based on the effective date of December 14, 2023, including the all tax filings due for 2023 to Florida State and the Federal Internal Revenue Service, the Annual Report for 2024, and to consummate all other transactions initiated on and after November 30, 2023 by the nonprofit corporation.

11. It is understood per § 607.0125 (4) the department's duty to file documents under this section is ministerial. If deemed necessary, Saint Cloud Community Mission, Inc. reserves its statutory rights to Appeal as provided by the Florida Statute at § 607.0126.

12. This Statement of Fact is made to provide a factual representation of the establishment and operational status of Saint Cloud Community Mission, Inc.

Under penalty of perjury, I affirm the foregoing information included in this Notarized Affidavit is true and correct to the best of my knowledge.

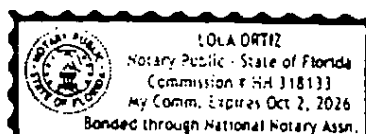
Signed on this 4<sup>th</sup> day of April, 2024.

Pedro Infante  
Pedro Infante  
Founding Director  
Saint Cloud Community Mission, Inc.

NOTARY PUBLIC STAMP & SIGNATURE

The foregoing Statement of Facts was acknowledged before me by means of ☒ physical presence or ☐ online notarization this 4<sup>th</sup> day of April 2024 by \_\_\_\_\_ who is personally known to me OR ☐ who has produced DL as identification

[Signature]  
Notarized Public Signature





By-Laws

Saint Cloud Community Mission Association was founded by a meeting of the membership on May 17 of 2020. The membership approved the Articles of Organization at said meeting. We state and certify that Saint Cloud Community Mission Association is a non-stock, not-for-profit organization that was established in St. Cloud, Florida on May 17 of 2020.

By these Bylaws, Saint Cloud Community Mission Association will operate as a non-commercial, non-profit Organization, to apply for, construct and operate an educational LPTM station assigned to St. Cloud, Florida

Saint Cloud Community Mission Association has a two-part educational goal. To provide, by working with local Schools, Churches and other such organizations, educational and informative programming that is not currently available to the citizens within its proposed broadcast coverage area

Our organization would like to use the station as a teaching tool to allow citizens within the broadcast coverage area that wish to learn to produce their own educational and informative programming a real-world laboratory to work in

Our organization feels that not only are Hispanic members of our community under counted in recent census taking, but there is also very little programming on radio currently in the area for this part of our community. We propose to devote large blocks of programming time to these members of the community and will recruit Spanish speaking members to produce programming in Spanish.

If awarded an LPTM station, this organization will produce and provide programming 24 hrs. a day, 7 days a week.

The governing board of the LPTM station will require 75% of its total board members to reside within 10 miles of the proposed transmitting

antenna site.

We are a non-profit organization and will follow all county, city, state and federal laws

All decisions will be decided by a majority vote of the board using Roberts Rules of Order.

IN WITNESS WHEREOF, the said party, Teresa D Lopez, has signed and sealed these presents the day and year first above written, Signed, Sealed, and Delivered in the presence of

Teresa D Lopez  
Printed Name

[Signature]  
Signature

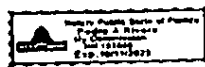
State of Florida  
County Of Osceola

On March 30, 2023, appeared before me, Teresa D Lopez known to me, or proved to me based on satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within the instrument and acknowledged to me that he/she executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted executed the instrument.

Witness my hand and official Seal:

[Signature]  
Signature of Notary

Notary Seal



IN WITNESS WHEREOF, the said party, Pedro Infante, has signed and sealed these presents the day and year first above written, Signed, Sealed, and Delivered in the presence of

PEDRO INFANTE  
Printed Name

[Signature]  
Signature

State of Florida  
County Of Osceola

On March 30, 2023, appeared before me, Pedro Infante known to me, or proved to me based on satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within the instrument and acknowledged to me that he/she executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted executed the instrument.

Witness my hand and official Seal:

[Signature]  
Signature of Notary

Notary Seal

